

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

|                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                      |  |                                                                                                                                                                                           |  |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| The MPAC Instruction Guide explains how to complete this form. |                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1 Filer ID<br>(Ethics Commission Filers)<br>00057462 |  | 2 Total pages filed:<br>4                                                                                                                                                                 |  |
| 3 COMMITTEE NAME<br>Jacobs Employees Texas State PAC           |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                      |  | OFFICE USE ONLY<br><br>Date Received<br>ELECTRONICALLY FILED<br>11/05/2025<br><br>Date Hand-delivered or Date Postmarked<br><br>Receipt # Amount<br><br>Date Processed<br><br>Date Imaged |  |
| 4 COMMITTEE ADDRESS                                            | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP<br>1999 Bryan Street, Suite 3500<br><br>Dallas, TX 75201-3136                                                                                                                                                                                                                                                                                                                            |                                                      |  |                                                                                                                                                                                           |  |
| 5 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR FIRST MI<br>Sindhu<br><br>NICKNAME LAST SUFFIX<br>Avalokita                                                                                                                                                                                                                                                                                                                                                                  |                                                      |  |                                                                                                                                                                                           |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1999 Bryan Street<br>Suite 3500<br>Dallas, TX 75201                                                                                                                                                                                                                                                                                                             |                                                      |  |                                                                                                                                                                                           |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS                           | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1999 Bryan Street<br>Suite 3500<br>Dallas, TX 75201                                                                                                                                                                                                                                                                                                                      |                                                      |  |                                                                                                                                                                                           |  |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE PHONE NUMBER EXTENSION<br>(972) 971-7870                                                                                                                                                                                                                                                                                                                                                                                         |                                                      |  |                                                                                                                                                                                           |  |
| 9 REPORT TYPE                                                  | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)                                                                                                                                                                                                                                                                    |                                                      |  |                                                                                                                                                                                           |  |
| 10 MONTHLY REPORT FILING DEADLINE                              | <input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5<br><input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input checked="" type="checkbox"/> November 5<br><input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5 |                                                      |  |                                                                                                                                                                                           |  |
| 11 PERIOD COVERED                                              | Month Day Year    THROUGH    Month Day Year<br>09/26/2025          10/25/2025                                                                                                                                                                                                                                                                                                                                                              |                                                      |  |                                                                                                                                                                                           |  |

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

|                                                                                                         |                                                                                                      |                                                                                                                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>Jacobs Employees Texas State PAC                                            |                                                                                                      | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00057462                                                                                                                                                                                         |
| <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>        | \$ 77,357.07                                                                                                                                                                                                                                      |
| 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.

Sindhu Avalokita  
\_\_\_\_\_  
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 - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 4

|                                                              |                                                                                                                        |                                                           |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>17 COMMITTEE NAME</b><br>Jacobs Employees Texas State PAC |                                                                                                                        | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00057462 |
| <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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 750.00                                                 |

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/1 Rpt: 4/4

2 FILER NAME

Jacobs Employees Texas State PAC

3 Filer ID (Ethics Commission Filers)  
00057462

4 Date

10/25/2025

5 Name of person from whom amount is received

Paulette Guajardo Campaign

8 Amount (\$)

\$750.00

6 Address of person from whom amount is received; City; State; Zip Code

Corpus Christi, TX 78403

7 Purpose for which amount is received

Political contribution returned to filer

☒ Check if political contribution returned to filer