# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

## FORM COR-PAC

	Filer ID (Ethi	cs Commission Filers) 2	? Total pages filed:	OFFICE USE ONLY
	00088061		5	Date Received
3	COMMITTEE NAME	Westlake Eanes Democr	ELECTRONICALLY FILED 11/18/2025	
4	TREASURER NAME	Hinton, John I.		Date Hand delivered or Date Destroyled
5	ORIGINAL		□ a"	Date Hand-delivered or Date Postmarked
	REPORT TYPE	X January 15 July 15 30th day before election	Runoff  10th day after campaign treasurer resignation  Dissolution report	Receipt # Amount
		8th day before election	Other (specify)	Date Processed
6	ORIGINAL PERIOD COVERED	Month Day Year 10/27/2024	Month Day Year THROUGH 12/31/2024	Date Imaged
7	EXPLANATION OF C	ORRECTION		_
8	AFFIDAVIT		I swear, or affirm, under penalty of perjurand correct.  Check the box next to any and all applications application of the company of the com	able statements:  affirm, that the original report that an intent to mislead or to sined in the report.  that I am filing this corrected the sess day after the date I learned
			swear, or affirm, that any error or of	
	AFFIX NOTARY ST	AMP / SEAL ABOVE	filed was made in good faith.  John I. Hi  Signature of Campa	mission in the report as originally
	Sworn to and subsc	ribed before me, by the said	filed was made in good faith. John I. Hi	mission in the report as originally inton aign Treasurer

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

#### 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) 00088061 3 COMMITTEE NAME **OFFICE USE ONLY** Westlake Eanes Democrats Date Received **ELECTRONICALLY FILED** 11/18/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2 Jeffery Cove Date Hand-delivered or Date Postmarked Change of Address Rollingwood, TX 78746 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** John I. NAME NICKNAME LAST **SUFFIX** Hinton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2 Jeffery Cove STREET **ADDRESS** (Residence or Business) Rollingwood, TX 78746 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2 Jeffery Cove MAILING **ADDRESS** Rollingwood, TX 78746 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 327-5155 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12	COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
	Westlake Eanes Democrats 000			000880	061
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
	(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		
			в. Оррозец		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	630.53
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	630.53
	EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00
		4. TOTAL POLITICA	L EXPENDITURES	\$	392.00
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	7,136.25
	OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16	AFFIDAVIT				
			I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
	John I. Hinton				
	Signature of Campaign				easurer
	AFFIX NOTARY	STAMP / SEAL ABOVE			
			, th	nis the	day
	of	, 20, to certify v	which, witness my hand and seal of office.		
	Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of	officer administering oath

# **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

				4 of 5			
		EE NAME Eanes Democrats	<b>18</b> Filer ID 00088061	(Ethics Commission Filers)			
	19 SCHEDULE SUBTOTALS						
	ME OF	SUBTOTAL AMOUNT					
1.	X	\$ 630.53					
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$			
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$			
5.		\$					
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 (	DRGANIZATION	\$			
9.		SCHEDULE E: LOANS		\$			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 392.00			
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 I TO FILER	RETURNED	\$			

## POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

## SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y - ( al Committee L	Food/Beverage Expense Gift/Awards/Memorials Expense .egal Services The Instruction Guide explain:	Polling Expense Printing Expense Salaries/Wages/Contract Labo s how to complete this form.	Travel OTHE	in District Out of District R (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		<u> </u>	3 Filer	ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5		nes Democrats		I	38061
4 Date	5 Payee name			<u> </u>	
11/20/2024	Lass, Julie (1	Ms.)			
6 Amount (\$)	7 Payee address	s; City; State	e; Zip Code		
\$392.00	6207 Turtle F	Point			
Expenditure from corporate funds	Austin, TX 7	8746			
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
			I —	ustin, TX, officen eimbursem	older living expense
			Postage	eiiiibuiseiiii	siit.
9 Complete ONLY if direct	Candidate/Offic	eholder name	Office sought	(	Office held
expenditure to benefit C/O	Н				