

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00016041		2 Total pages filed: 15		OFFICE USE ONLY	
3 COMMITTEE NAME Texas Society Of Certified Public Accountants PAC				Date Received ELECTRONICALLY FILED 12/23/2025	
4 TREASURER NAME Besserman, Kenneth (Mr.)				Date Hand-delivered or Date Postmarked	
5 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input checked="" type="checkbox"/> Other (specify) <u>May 5</u>	
6 ORIGINAL PERIOD COVERED		Month Day Year 03/26/2025		Month Day Year THROUGH 04/25/2025	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

7 EXPLANATION OF CORRECTION

Schedule K was omitted from the original report. We have included the amended schedule K in this correction. The cash on hand and contributors names have been appropriately adjusted. The original report was filed in good faith and with no intent to mislead or misrepresent the contents of the report.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Kenneth Besserman

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

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

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 (Ethics Commission Filers) 00016041		2 Total pages filed: 15	
3 COMMITTEE NAME Texas Society Of Certified Public Accountants PAC				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/23/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 14131 Midway Rd., Suite 850 Addison, TX 75001				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Kenneth NICKNAME LAST SUFFIX Besserman				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10810 Sierra Oaks Austin, TX 78759				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 532-5441				
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 <input type="checkbox"/> February 5 <input checked="" type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <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 03/26/2025 04/25/2025				

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Society Of Certified Public Accountants PAC	13 Filer ID (Ethics Commission Filers) 00016041
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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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,550.00
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	\$ 1,260,383.23
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. Kenneth Besserman

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
4 of 15

17 COMMITTEE NAME Texas Society Of Certified Public Accountants PAC		18 Filer ID (Ethics Commission Filers) 00016041
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,550.00
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 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	\$ 799.33

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/10 Rpt: 5/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alberts II, Alan Brian <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77386-4596	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Other		9 Employer (See Instructions) Merrill Lynch
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldridge, Sheryl J <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008-4663	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Eckels bilt Inc
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bovey, Stephanie Lynn <hr/> Contributor address; City; State; Zip Code Plano, TX 75023-6429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shareholder		Employer (See Instructions) Stephanie L Bovey CPA PC
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crane, Shari Dianne <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712-8829	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Kasparian Underground, LLC
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis-Schubert, Lori M <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-3343	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sole Practitioner		Employer (See Instructions) Lori M Davis-Schubert CPA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/10 Rpt: 6/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeIMage, Sheri Kay 6 Contributor address; City; State; Zip Code Beaumont, TX 77703-1834	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Shareholder		9 Employer (See Instructions) Edgar Kiker & Cross PC
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dicharry, Kevin Paul Contributor address; City; State; Zip Code Magnolia, TX 77354-4464	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) Kevin P Dicharry CPA
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry, Leslie David Contributor address; City; State; Zip Code Arlington, TX 76012-3420	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) NA
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geist, Melanie Carol Contributor address; City; State; Zip Code San Antonio, TX 78209-6807	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Aprio
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geist, Melanie Carol Contributor address; City; State; Zip Code San Antonio, TX 78209-6807	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Aprio

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/10 Rpt: 7/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geist, Melanie Carol <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-6807	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Managing Partner		9 Employer (See Instructions) Aprio
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Steven R <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-6752	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive Officer		Employer (See Instructions) Goodman Financial Corporation
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jeff D <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381-2647	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Jeff D Harris CPA LLC
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Amy Foshee <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-4511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor/Teacher/Trainer		Employer (See Instructions) Trinity University
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornberger, William H <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-2725	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Jackson Walker LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 8/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johanns, Jeffrey Lee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78712-0100	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) University of Texas at Austin McCombs School of Business
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katopody, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-6316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Other		Employer (See Instructions) Katopody LLC
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirchhoff, Donald Herbert <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-6208	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lange, Douglas Earl <hr/> Contributor address; City; State; Zip Code Kingsland, TX 78639-4417	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Other		Employer (See Instructions) NA
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Roberto <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550-7994	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sole Practitioner		Employer (See Instructions) Roberto Lopez CPA PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/10 Rpt: 9/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luigi II, John Lee <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76301-2502	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Shareholder		9 Employer (See Instructions) MWH Group PC
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Gerardo Javier <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041-3642	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Mejia & Co PLLC
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Julie <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072-8278	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Other		Employer (See Instructions) VAZATA
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Isreal James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-2750	Amount of Contribution (\$) \$1,001.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Troutman Pepper Locke LLP
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Shawnee Marie <hr/> Contributor address; City; State; Zip Code Gatesville, TX 76528-2635	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shareholder		Employer (See Instructions) Shawnee Miller CPA PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/10 Rpt: 10/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, Stephen G 6 Contributor address; City; State; Zip Code Colleyville, TX 76034-4667	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) SGEN LLC
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perroni, Marietta Contributor address; City; State; Zip Code College Station, TX 77845-8371	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelle, Shanda Michelle Contributor address; City; State; Zip Code Fort Worth, TX 76109-5556	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sole Practitioner		Employer (See Instructions) Greater Good Accounting PLLC
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Kaleen Dianne Contributor address; City; State; Zip Code Amarillo, TX 79101-3433	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) Pantera Energy Company
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Gerry A Contributor address; City; State; Zip Code Fort Worth, TX 76109-6912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Robertson & Robertson, CPAs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 11/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez-Soriano, Michele <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Manager/Supervisor		9 Employer (See Instructions) Calvetti Ferguson
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez-Soriano, Michele <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Manager/Supervisor		Employer (See Instructions) Calvetti Ferguson
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez-Soriano, Michele <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Manager/Supervisor		Employer (See Instructions) Calvetti Ferguson
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez-Soriano, Michele <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Manager/Supervisor		Employer (See Instructions) Calvetti Ferguson
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, William D <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202-5315	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director/Department Head		Employer (See Instructions) DIRECTV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/10 Rpt: 12/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stegent, Loyd James <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77046-2404	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sole Practitioner		9 Employer (See Instructions) Stegent Financial Services PC
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Susie <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401-0083	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Officer		Employer (See Instructions) Branscomb PLLC
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, P Alice <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133-3209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sole Practitioner		Employer (See Instructions) Thomas Enterprises, LLC
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Twardowski, Amy Winn <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Johnstone Supply
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Twardowski, Amy Winn <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Johnstone Supply

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/10 Rpt: 13/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Twardowski, Amy Winn <hr/> 6 Contributor address; City; State; Zip Code Robstown, TX 78380	7 Amount of Contribution (\$) \$21.00
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) Johnstone Supply
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Twardowski, Amy Winn <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Johnstone Supply
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veale, Shana <hr/> Contributor address; City; State; Zip Code Lakeside, TX 76135-5203	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) Pharmchem Inc
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidal, MaKayla <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657-7137	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Other		Employer (See Instructions) NA
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Kenton Neil <hr/> Contributor address; City; State; Zip Code Waco, TX 76708-1588	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) Pattillo Brown & Hill LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/10 Rpt: 14/15
2 FILER NAME Texas Society Of Certified Public Accountants PAC		3 Filer ID (Ethics Commission Filers) 00016041
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William Charles <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433-6241	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA

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: 15/15

2 FILER NAME

Texas Society Of Certified Public Accountants PAC

3 Filer ID (Ethics Commission Filers)
00016041

4 Date

04/25/2025

5 Name of person from whom amount is received

Vanguard

8 Amount (\$)

\$790.00

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

Monroe, WI 53566

7 Purpose for which amount is received

Dividend income

☐ Check if political contribution returned to filer

Date

04/25/2025

Name of person from whom amount is received

Vanguard

Amount (\$)

\$9.33

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

Monroe, WI 53566

Purpose for which amount is received

Interest Income

☐ Check if political contribution returned to filer