

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085924	2 Total pages filed: 7			
3 COMMITTEE NAME Vote For GISD Kids		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/06/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS 1203 W Angeline St Groesbeck, TX 76642						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST Chris	MI	
	NICKNAME	LAST Rand	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1203 W Angeline St Groesbeck, TX 76642		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 1203 W Angeline St Groesbeck, TX 76642					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (254) 645-1331					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination					
10 PERIOD COVERED	Month 10/26/2025	Day	Year	Month 10/26/2025	Day	Year 01/06/2026
11 ELECTION	ELECTION DATE Month Day Year 11/04/2025	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Special				

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**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Vote For GISD Kids		13 FILER ID (Ethics Commission Filers) 00085924	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # GISD Bond
			ELECTION DATE Month Day Year 11/04/2025
DESCRIPTION School bond to improve school buildings			
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ 1,400.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,400.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,400.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00	
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. Chris Rand

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 - SPAC**FORM SPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Vote For GISD Kids	18 FILER ID (Ethics Commission Filers) 00085924
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,400.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 0.00	
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0.00	
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 D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input checked="" type="checkbox"/> SCHEDULE E: LOANS \$ 0.00	
8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 1,400.00	
9. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0.00	
10. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 0.00	
11. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 0.00	
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.			
2 FILER NAME Vote For GISD Kids			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (If applicable)
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 5/7
2 FILER NAME Vote For GISD Kids		3 Filer ID (Ethics Commission Filers) 00085924
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/1 Rpt: 6/7	2 FILER NAME Vote For GISD Kids	3 Filer ID (Ethics Commission Filers) 00085924	
4 Date 11/18/2025	5 Payee name CWJ Strategies		
6 Amount (\$) \$1,400.00	7 Payee address; City; 314 S Broadway Ave Tyler, TX 75702-7304		
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs and Road signs	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION**

FORM PAC-DR

7 of 7

The Instruction Guide explains how to complete this form. **Complete only if "Report Type" on page 1 is marked "Dissolution" **

1 COMMITTEE NAME Vote For GISD Kids	2 Filer ID (Ethics Commission Filers) 00085924
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3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Mr. Chris Rand

Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED

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