

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089022	2 Total pages filed: 17
3 COMMITTEE NAME Indigenous Peoples Caucus of the Texas Democratic Party		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/07/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 206 Cambridge Lane Longview, TX 75601			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		
	NICKNAME Durante	LAST	SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 206 Cambridge Lane Longview, TX 75601		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; TX		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (540) 820-5413		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month 07/01/2025	Day	Year
	THROUGH 12/31/2025		
11 ELECTION	Month Day Year	ELECTION DATE	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Indigenous Peoples Caucus of the Texas Democratic Party		13 FILER ID (Ethics Commission Filer) 00089022
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 checked="" 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)	\$ 533.22
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,721.40
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. Alfred Durante

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 - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 17

17 COMMITTEE NAME Indigenous Peoples Caucus of the Texas Democratic Party	18 FILER ID (Ethics Commission Filers) 00089022
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 255.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 278.22	
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 10.11	
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 \$ 0.80	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/17
2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party		3 Filer ID (Ethics Commission Filers) 00089022
4 Date 07/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas 6 Contributor address; City; State; Zip Code Boston, MA 02196	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/17
2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party		3 Filer ID (Ethics Commission Filers) 00089022
4 Date 09/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas 6 Contributor address; City; State; Zip Code Boston, MA 02196	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/17
2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party		3 Filer ID (Ethics Commission Filers) 00089022
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas 6 Contributor address; City; State; Zip Code Boston, MA 02196	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ActBlue Texas Contributor address; City; State; Zip Code Boston, MA 02196	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/4 Rpt: 7/17	
2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party		3 Filer ID (Ethics Commission Filers) 00089022	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/29/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)	8 Amount of contribution (\$) \$18.12	9 In-kind contribution description In Kind Zoom Service
	7 Contributor address; City; State; Zip Code Atascocita, TX 77346		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker		11 Employer (FOR NON-JUDICIAL) (See instructions) None	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)	Amount of contribution (\$) \$18.12	In-kind contribution description In Kind Zoom Service
	Contributor address; City; State; Zip Code Atascocita, TX 77346		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker		Employer (FOR NON-JUDICIAL) (See instructions) None	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)	Amount of contribution (\$) \$18.12	In-kind contribution description In Kind Zoom Service
	Contributor address; City; State; Zip Code Atascocita, TX 77346		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker		Employer (FOR NON-JUDICIAL) (See instructions) None	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 2/4 Rpt: 8/17</p>
<p>2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party</p>				<p>3 Filer ID (Ethics Commission Filers) 00089022</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 09/29/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) 7 Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>8 Amount of contribution (\$) \$18.12</p> <p>9 In-kind contribution description In Kind Zoom Service</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 08/28/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>Amount of contribution (\$) \$18.12</p> <p>In-kind contribution description In Kind Zoom Service</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 07/29/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>Amount of contribution (\$) \$18.12</p> <p>In-kind contribution description In Kind Zoom Service</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 3/4 Rpt: 9/17</p>
<p>2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party</p>				<p>3 Filer ID (Ethics Commission Filers) 00089022</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 12/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)</p>		<p>8 Amount of contribution (\$) \$28.25</p>	<p>9 In-kind contribution description In Kind Mailchimp Service</p>
	<p>7 Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>			<p>11 Employer (FOR NON-JUDICIAL) (See instructions) None</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>			<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)</p>		<p>Amount of contribution (\$) \$28.25</p>	<p>In-kind contribution description In Kind Mailchimp Service</p>
	<p>Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.)</p>		<p>Amount of contribution (\$) \$28.25</p>	<p>In-kind contribution description In Kind Mailchimp Service</p>
	<p>Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 4/4 Rpt: 10/17</p>
<p>2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party</p>				<p>3 Filer ID (Ethics Commission Filers) 00089022</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 09/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) 7 Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>8 Amount of contribution (\$) \$28.25 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p>9 In-kind contribution description In Kind Mailchimp Service</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 08/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>Amount of contribution (\$) \$28.25 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p>In-kind contribution description In Kind Mailchimp Service</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 07/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanggi, Kristin (Mrs.) Contributor address; City; State; Zip Code Atascocita, TX 77346</p>			<p>Amount of contribution (\$) \$28.25 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p>In-kind contribution description In Kind Mailchimp Service</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Homemaker</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) None</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

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: 1/5 Rpt: 11/17	2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00089022
4 Date 07/05/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.99	7 Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 07/14/2025	Payee name ActBlue Texas	
Amount (\$) \$0.20	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 07/24/2025	Payee name ActBlue Texas	
Amount (\$) \$0.20	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held

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: 2/5 Rpt: 12/17	2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00089022
4 Date 08/05/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.99	7 Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 08/14/2025	Payee name ActBlue Texas	
Amount (\$) \$0.20	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 09/11/2025	Payee name ActBlue Texas	
Amount (\$) \$0.99	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held

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: 3/5 Rpt: 13/17	2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00089022
4 Date 09/24/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.20	7 Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 09/28/2025	Payee name ActBlue Texas	
Amount (\$) \$0.99	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 10/05/2025	Payee name ActBlue Texas	
Amount (\$) \$0.99	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held

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: 4/5 Rpt: 14/17	2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00089022
4 Date 10/24/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.20	7 Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 11/05/2025	Payee name ActBlue Texas	
Amount (\$) \$0.99	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 11/28/2025	Payee name ActBlue Texas	
Amount (\$) \$0.20	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held

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: 5/5 Rpt: 15/17	2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00089022
4 Date 12/05/2025	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.99	7 Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held
Date 12/09/2025	Payee name ActBlue Texas	
Amount (\$) \$1.98	Payee address; City; State; Zip Code PO Box 962017 Boston, MA 02196	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee ActBlue Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue Texas	Office sought Office held

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/2 Rpt: 16/17</p>
<p>2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party</p>		<p>3 Filer ID (Ethics Commission Filers) 00089022</p>
<p>4 Date 07/31/2025</p>	<p>5 Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>8 Amount (\$) \$0.13</p>
	<p>7 Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.13</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/29/2025</p>	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.13</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.13</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 09/30/2025</p>	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.13</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.14</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/28/2025</p>	<p>Name of person from whom amount is received Eastman Credit Union</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607</p>	<p>Amount (\$) \$0.13</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer

**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: 2/2 Rpt: 17/17
2 FILER NAME Indigenous Peoples Caucus of the Texas Democratic Party		3 Filer ID (Ethics Commission Filers) 00089022
4 Date 12/31/2025	5 Name of person from whom amount is received Eastman Credit Union	8 Amount (\$) \$0.14
	6 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75607	
	7 Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer