

**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) 00016030	2 Total pages filed: 6				
3 COMMITTEE NAME Political Action Committee for Engineers		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/13/2026 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 8140 N. Mopac Expy. #1-220 Austin, TX 78759							
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST James	MI		
	NICKNAME	LAST Williamson	SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 8140 N. Mopac Expy. Bldg. 1 Ste. 220 Austin, TX 78759		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 8140 N. Mopac Expy. Bldg. 1 Ste. 220 Austin, TX 78759						
8 CAMPAIGN TREASURER PHONE	AREA CODE (512) 472-9286	PHONE NUMBER	EXTENSION				
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 10/26/2025	Day	Year	Month 12/31/2025	Day	Year	
11 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	Primary <input checked="" type="checkbox"/>	Runoff <input type="checkbox"/>	Other <input type="checkbox"/>	ELECTION TYPE General <input type="checkbox"/> Special <input type="checkbox"/>

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Political Action Committee for Engineers		13 FILER ID (Ethics Commission Filers) 00016030
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)	\$ 1,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 19,000.09
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. James Williamson

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 6

17 COMMITTEE NAME Political Action Committee for Engineers	18 FILER ID (Ethics Commission Filers) 00016030
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,200.00	
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 checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7.64	
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2 FILER NAME Political Action Committee for Engineers		3 Filer ID (Ethics Commission Filers) 00016030
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolander P.E., Jeffery (Dr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77242	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonhard P.E., Robert (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider P.E., Joseph (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth , TX 76179-2725	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton P.E., James (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Hewitt, TX 76643	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Sch: 1/2 Rpt: 5/6	3 Filer ID (Ethics Commission Filers) 00016030
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 10/31/2025	6 Payee name Texas Engineering Foundation	
7 Amount (\$) \$2.40	8 Payee address; City; State; Zip Code 8140 N. Mopac Expressway Building 1, Suite 220 Austin, TX 78759	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 October Copies
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held
Date 11/30/2025	Payee name Texas Engineering Foundation	
Amount (\$) \$0.45	Payee address; City; State; Zip Code 8140 N. Mopac Expressway Building 1, Suite 220 Austin, TX 78759	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 November Copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Sch: 2/2 Rpt: 6/6	3 Filer ID (Ethics Commission Filers) 00016030
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 12/31/2025	6 Payee name Texas Engineering Foundation	
7 Amount (\$) \$0.55	8 Payee address; City; State; Zip Code 8140 N. Mopac Expressway Building 1, Suite 220 Austin, TX 78759	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 December Copies
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held
Date 10/31/2025	Payee name Texas Society of Professional Engineers	
Amount (\$) \$4.24	Payee address; City; State; Zip Code 8140 N. Mopac Expressway Building 1, Suite 220 Austin, TX 78759	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense October Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held