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): 00089924

2 Total pages filed: 5

3 COMMITTEE NAME
Rockwall Residents for Ethical and Accountable Leadership

OFFICE USE ONLY

Date Received
ELECTRONICALLY FILED
01/14/2026

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

4 COMMITTEE ADDRESS
☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3090 N Goliad ST #102 STE 162

Rockwall, TX 75087

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr.
FIRST: Eric
MI:
NICKNAME:
LAST: Bott
SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1330 Coastal Drive

Rockwall, TX 75087

7 CAMPAIGN TREASURER MAILING ADDRESS
☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3090 N. Goliad St.
102-162
Rockwall, TX 75087

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 728-6087

9 REPORT TYPE

- ☒ January 15
- ☐ July 15
- ☐ 30th day before election
- ☐ 8th day before election
- ☐ Runoff
- ☐ Dissolution (Attach PAC-DR)
- ☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 10/26/2025 THROUGH Month Day Year: 12/31/2025

11 ELECTION

ELECTION DATE
Month Day Year: 01/15/2026

ELECTION TYPE
- ☐ Primary
- ☐ Runoff
- ☒ Other
- ☐ General
- ☐ Special

Semiannual campaign finance

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
Rockwall Residents for Ethical and Accountable Leadership	00089924

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) [X] 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)	$ 0.00
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	$ 1,187.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 1,000.00

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. Eric Bott

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

17 COMMITTEE NAME	**18** Filer ID (Ethics Commission Filers)
Rockwall Residents for Ethical and Accountable Leadership	00089924

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$** 0.00
2.	[X]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$** 0.00
3.	[X]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$** 0.00
4.	[ ]	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
5.	[ ]	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
6.	[ ]	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**
7.	[ ]	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**
8.	[ ]	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
9.	[X]	SCHEDULE E: LOANS	**$** 0.00
10.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$** 0.00
11.	[X]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$** 0.00
12.	[X]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$** 0.00
13.	[X]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$** 0.00
14.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
15.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 4/5

2 FILER NAME
Rockwall Residents for Ethical and Accountable Leadership

3 Filer ID (Ethics Commission Filers)
00089924

4 TOTAL OF UNITEMIZED PLEDGES

$ 0.00

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____)	**8** Amount of pledge ($)	**9** In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		

☐ 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: 5/5

2 FILER NAME
Rockwall Residents for Ethical and Accountable Leadership

3 Filer ID (Ethics Commission Filers)
00089924

4 TOTAL OF UNITEMIZED LOANS — **$** 0.00

5 Date of loan

7 Name of lender ☐ 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
☐ None

15 Check if personal funds were deposited into political account (See Instructions) ☐

16 GUARANTOR INFORMATION
☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal occupation

21 Employer (See Instructions)