

**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) 00089097	2 Total pages filed: 21			
3 COMMITTEE NAME Alliance for Black Economics Political Action Committee		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 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 2031 John West Road #113 Dallas, TX 75228						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST Timothy	MI	
	NICKNAME	LAST Jackson	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2031 John West Road #113 Dallas, TX 75228		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 2031 John West Road #113 Dallas, TX 75228					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 275-9541					
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	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special		<input type="checkbox"/> Other

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Alliance for Black Economics Political Action Committee		13 FILER ID (Ethics Commission Filers) 00089097
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)	\$ 1,414.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,704.95
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. Timothy Jackson

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 21

17 COMMITTEE NAME Alliance for Black Economics Political Action Committee	18 FILER ID (Ethics Commission Filers) 00089097
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
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 checked="" 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 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: 1/13 Rpt: 4/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	7 Amount of Contribution (\$) \$24.81
	6 Contributor address; City; State; Zip Code Desoto, TX 75115	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) AAFES
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	Amount of Contribution (\$) \$13.96
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AAFES
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	Amount of Contribution (\$) \$13.96
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AAFES
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	Amount of Contribution (\$) \$13.96
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AAFES
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	Amount of Contribution (\$) \$13.96
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AAFES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/13 Rpt: 5/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 07/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	7 Amount of Contribution (\$) \$24.81
	6 Contributor address; City; State; Zip Code Desoto, TX 75115	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) AAFES
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/13 Rpt: 6/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$24.75
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Henry Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$24.75
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$14.85
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$14.85
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$14.85
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/13 Rpt: 7/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben	7 Amount of Contribution (\$) \$14.85
	6 Contributor address; City; State; Zip Code Garland, TX 75043	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) DISD
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben	Amount of Contribution (\$) \$14.85
	Contributor address; City; State; Zip Code Garland, TX 75043	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben	Amount of Contribution (\$) \$14.85
	Contributor address; City; State; Zip Code Garland, TX 75043	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Reuben	Amount of Contribution (\$) \$14.85
	Contributor address; City; State; Zip Code Garland, TX 75043	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) DISD
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree	Amount of Contribution (\$) \$24.81
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/13 Rpt: 8/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$24.81
	8 Principal occupation / Job title (See Instructions) Self	9 Employer (See Instructions) Self
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$24.81
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$24.81
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$24.81
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Desiree Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$24.81
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/21
2 FILER NAME Alliance for Black Economics Political Action Committee			3 Filer ID (Ethics Commission Filers) 00089097
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	7 Amount of Contribution (\$) \$24.75	
	6 Contributor address; City; State; Zip Code Desoto, TX 75115		
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Desoto, TX 75115		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Desoto, TX 75115		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Desoto, TX 75115		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Desoto, TX 75115		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/13 Rpt: 10/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy	7 Amount of Contribution (\$) \$24.75
	6 Contributor address; City; State; Zip Code Desoto, TX 75115	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Lawrenceville, GA 30043	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Lawrenceville, GA 30043	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Lawrenceville, GA 30043	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Lawrenceville, GA 30043	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/13 Rpt: 11/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk 6 Contributor address; City; State; Zip Code Lawrenceville, GA 30043	7 Amount of Contribution (\$) \$24.75
	8 Principal occupation / Job title (See Instructions) Self	9 Employer (See Instructions) Self
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kirk Contributor address; City; State; Zip Code Lawrenceville, GA 30043	Amount of Contribution (\$) \$24.75
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason Contributor address; City; State; Zip Code Forney, TX 75126	Amount of Contribution (\$) \$23.47
	Principal occupation / Job title (See Instructions) Law Enforcement	Employer (See Instructions) Desoto
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason Contributor address; City; State; Zip Code Forney, TX 75126	Amount of Contribution (\$) \$23.47
	Principal occupation / Job title (See Instructions) Law Enforcement	Employer (See Instructions) Desoto
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason Contributor address; City; State; Zip Code Forney, TX 75126	Amount of Contribution (\$) \$23.47
	Principal occupation / Job title (See Instructions) Law Enforcement	Employer (See Instructions) Desoto

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/13 Rpt: 12/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason	7 Amount of Contribution (\$) \$23.47
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) Desoto
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason	Amount of Contribution (\$) \$23.47
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Desoto
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jason	Amount of Contribution (\$) \$23.47
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Desoto
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/21
2 FILER NAME Alliance for Black Economics Political Action Committee		3 Filer ID (Ethics Commission Filers) 00089097
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	7 Amount of Contribution (\$) \$24.75
	6 Contributor address; City; State; Zip Code Conroe, TX 77385	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson III, Albert	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	Amount of Contribution (\$) \$24.75
	Contributor address; City; State; Zip Code Lancaster, TX 75134	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 11/13 Rpt: 14/21
2 FILER NAME Alliance for Black Economics Political Action Committee			3 Filer ID (Ethics Commission Filers) 00089097
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	7 Amount of Contribution (\$) \$24.75	
	6 Contributor address; City; State; Zip Code Lancaster, TX 75134		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Lancaster, TX 75134		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Lancaster, TX 75134		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Lancaster, TX 75134		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique	Amount of Contribution (\$) \$24.75	
	Contributor address; City; State; Zip Code Lancaster, TX 75134		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 12/13 Rpt: 15/21
2 FILER NAME Alliance for Black Economics Political Action Committee			3 Filer ID (Ethics Commission Filers) 00089097
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Monique 6 Contributor address; City; State; Zip Code Lancaster, TX 75134	7 Amount of Contribution (\$) \$24.75	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$24.75	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$24.75	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$24.75	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$24.75	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 13/13 Rpt: 16/21
2 FILER NAME Alliance for Black Economics Political Action Committee			3 Filer ID (Ethics Commission Filers) 00089097
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka 6 Contributor address; City; State; Zip Code Pflugerville, TX 78691	7 Amount of Contribution (\$) \$24.75	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self	
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ericka Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$24.75	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	

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: 17/21	2 FILER NAME Alliance for Black Economics Political Action Committee	3 Filer ID (Ethics Commission Filers) 00089097
4 Date 07/28/2025	5 Payee name Constant Contact	
6 Amount (\$) \$37.31	7 Payee address; City; State; Zip Code 890 Winter Street Suite 300 Waltham, MA 02451	
<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 Email Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/28/2025	Payee name Constant Contact	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 890 Winter Street Suite 300 Waltham, MA 02451	
<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 Email Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Constant Contact	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 890 Winter Street, Suite 300 Waltham, MA 02451	
<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 Email Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 18/21	2 FILER NAME Alliance for Black Economics Political Action Committee	3 Filer ID (Ethics Commission Filers) 00089097
4 Date 10/28/2025	5 Payee name Constant Contact	
6 Amount (\$) \$37.31	7 Payee address; City; State; Zip Code 890 Winter Street, Suite 300 Waltham, MA 02451	
<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 Email Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Constant Contact	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 890 Winter Street, Suite 300 Waltham, MA 02451	
<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 Email Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name Constant Contact	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 890 Winter Street, Suite 300 Waltham, MA 02451	
<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 Email Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 19/21	2 FILER NAME Alliance for Black Economics Political Action Committee	3 Filer ID (Ethics Commission Filers) 00089097
4 Date 07/02/2025	5 Payee name Google Suite	
6 Amount (\$) \$138.15	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview , CA 94043	
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 Web service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/02/2025	Payee name Google Suite	
Amount (\$) \$160.93	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
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 Web service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Google Suite	
Amount (\$) \$168.85	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, TX 94043	
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 Web service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 20/21	2 FILER NAME Alliance for Black Economics Political Action Committee	3 Filer ID (Ethics Commission Filers) 00089097
4 Date 10/02/2025	5 Payee name Google Suite	
6 Amount (\$) \$168.85	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
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 Web service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Google Suite	
Amount (\$) \$168.85	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
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 Web service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Google Suite	
Amount (\$) \$168.85	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
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 Web service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 21/21	2 FILER NAME Alliance for Black Economics Political Action Committee	3 Filer ID (Ethics Commission Filers) 00089097	
4 Date 12/02/2025	5 Payee name Wix		
6 Amount (\$) \$506.61	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd, Ste 600 San Fransisco , CA 94158		
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 Website Annual Payment	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held