

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) 00027567	2 Total pages filed: 25
3 COMMITTEE NAME Houston Black American Democrats Political Action Committee			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4806 Edfield St Houston, TX 77033		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Toni M. NICKNAME LAST SUFFIX Lewis		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4806 Edfield Houston, TX 77033		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4806 Edfield Houston, TX 77033		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 419-9643		
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 Day Year 10/26/2025 THROUGH Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year 11/04/2025	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" 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 Houston Black American Democrats Political Action Committee	13 Filer ID (Ethics Commission Filers) 00027567
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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 Christian Menefee Congressional District 18
		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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 27,750.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 29,630.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,099.13
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.

Ms. Toni M. Lewis

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Houston Black American Democrats Political Action Committee		13 Filer ID (Ethics Commission Filers) 00027567
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 Dwight Boykins City Council Member
		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.)	

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Houston Black American Democrats Political Action Committee		18 Filer ID (Ethics Commission Filers) 00027567
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 27,750.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 29,630.64
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: 1/9 Rpt: 5/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abner, Michael 6 Contributor address; City; State; Zip Code Houston, TX 77043	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Harris county
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Jr, Lawrence Contributor address; City; State; Zip Code Houston, TX 77085	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykins, Dwight Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$6,000.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) dBoykins Consulting
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briones, Lesley Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Harris County
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jeremy Contributor address; City; State; Zip Code Houston, TX 77047	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Records Manager		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 6/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, Dominique 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Calhoun Meredith
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Eric Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castex-Tatum, Martha Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) City Council Member		Employer (See Instructions) City of Houston
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Pernell Contributor address; City; State; Zip Code Houston , TX 77027	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Baker Hughes
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demming, Tamika (Mrs.) Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 7/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77267	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) City Council Member		Employer (See Instructions) City of Houston
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradney, Kiara <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Attorney

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 8/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Ronald 6 Contributor address; City; State; Zip Code Houston, TX 77021	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Ronald Green Law Firm
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guice, Ashley Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County PD Office
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Kristin Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Jude		Employer (See Instructions) State of Texas
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudspeth, Teneshia Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Deputy Clerk		Employer (See Instructions) Harris County
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Charlene Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 9/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Tonya <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77084	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Darrell <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Military Department
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Julia <hr/> Contributor address; City; State; Zip Code Houston, TX 77252	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 10/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Pamela <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris Co. Probate Court 2
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menefee, Christian (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Beau <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Whitney <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Moore Legal Group PLLC
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorer, Bernard <hr/> Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) United States		Employer (See Instructions) Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 11/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Nora <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77043	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munnerlyn, Jamal <hr/> Contributor address; City; State; Zip Code Venice, TX 90291	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) The Donatto Group
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Annise <hr/> Contributor address; City; State; Zip Code Houston, TX 77266	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, nicole <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nicole Perdue
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, Edward <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) City Council		Employer (See Instructions) City of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 12/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ron (Rep.) <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) State Rep		9 Employer (See Instructions) State of Texas
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roth, Donna <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Leah <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Manpreet <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Zurich
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Katy Jewett Memorial Training Fund <hr/> Contributor address; City; State; Zip Code Minneapolis, TX 66480	Amount of Contribution (\$) \$250.00
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: 9/9 Rpt: 13/25
2 FILER NAME Houston Black American Democrats Political Action Committee		3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Harris County Courts		9 Employer (See Instructions) Judge
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Gerald <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Broker/Owner		Employer (See Instructions) Womack Development
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilson, Katie <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Lawer		Employer (See Instructions) Harris County Public Defender

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 F1: Sch: 1/12 Rpt: 14/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/11/2025	5 Payee name 2026 MLK Unity	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 900 Smith St Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD 2026 MLK Parade
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2025	Payee name Andrea Beyond The D'cor	
Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 Sorrento Dr Ballwin Missouri City, TX 77489	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) HBAD Fall Event Decor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HBAD Fall Event Decor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Bailey, Cynthia	
Amount (\$) \$1,140.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7830 Flintridge Houston, TX 77028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense H-BAD Poll worker expense
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 2/12 Rpt: 15/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/05/2025	5 Payee name Bailey, Cynthia	
6 Amount (\$) \$1,140.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7830 Flintridge Houston, TX 77028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense H-BAD Final Poll Working Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Bailey, Cynthia	
Amount (\$) \$1,140.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7830 Flintridge Houston, TX 77028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense H-BAD 2025 Election poll workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Carroll, Angel	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3003 Summer Street #441 Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 3/12 Rpt: 16/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/22/2025	5 Payee name Epicast Printing	
6 Amount (\$) \$239.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 611 E Parker Rd Houston, TX 77076	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD 2025 Fall Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2025	Candidate/Officeholder name Expensive Taste Catering LLC	
Amount (\$) \$1,097.82 <input type="checkbox"/> Expenditure from corporate funds	Office sought 4016 Caplin St Houston, TX 77026	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Catering HBAD 2025 Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/04/2025	Candidate/Officeholder name Galdames, Paola	
Amount (\$) \$180.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 9807 Lum Ln Houston, TX 77078	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 F1: Sch: 4/12 Rpt: 17/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 10/27/2025	5 Payee name JJC National LLC	
6 Amount (\$) \$967.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 315 W Alabama Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 HBAD Text Outreach
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Kyle Johnston Campaign	
Amount (\$) \$1,348.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1140 FM 2094 Kemah, TX 77565	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Text Blast with Image
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2025	Payee name Kyle Johnston Campaign	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1140 FM 2094 Kemah, TX 77565	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 HBAD 2025 GOTV
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 5/12 Rpt: 18/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/20/2025	5 Payee name Kyle Johnston Campaign	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1140 FM 2094 Kemah, TX 77565	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 HBAD 2025 GOTV
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2025	Payee name Kyle Johnston Campaign	
Amount (\$) \$1,800.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1140 FM 2094 Kemah, TX 77565	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 HBAD GOTV 2025
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Lenoir, Walker	
Amount (\$) \$367.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8238 Sharondale Dr Houston, TX 77033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 6/12 Rpt: 19/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/05/2025	5 Payee name Lenoir, Walker	
6 Amount (\$) \$180.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8238 Sharondale Dr Houston, TX 77033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/17/2025	Candidate/Officeholder name Love Your Journey	
Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 10887 South Wilcrest Drive Houston, TX 77099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD 2025 Fall Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2025	Candidate/Officeholder name Love Your Journey	
Amount (\$) \$1,048.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 10887 South Wilcrest Drive Houston, TX 77099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD Fall 2025 Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 F1: Sch: 7/12 Rpt: 20/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/17/2025	5 Payee name M3 Graphic Inc	
6 Amount (\$) \$312.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11730 S Wilcrest Dr Houston, TX 77099	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 HBAD 2025 Materials for Promotion
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2025	Payee name M3 Graphic Inc	
Amount (\$) \$1,268.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11730 S Wilcrest Dr Houston, TX 77099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) HBAD Materials	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HBAD Materials - banner, 200 booklets, table cloths
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2025	Payee name MailChimp	
Amount (\$) \$117.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 760 Ralph McGill Blvd. Atlanta, GA 30312	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 8/12 Rpt: 21/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/22/2025	5 Payee name MailChimp	
6 Amount (\$) \$117.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 760 Ralph McGill Blvd. Atlanta, GA 30312	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2025	Payee name Metoyer Roy Printing	
Amount (\$) \$188.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4316 Europa St. Houston, TX 77022	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) HBAD 2025 Soiree Fundraiser	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HBAD 2025 Soiree Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2025	Payee name Metoyer Roy Printing	
Amount (\$) \$119.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4316 Europa St. Houston, TX 77022	
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 HBAD Printing
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 9/12 Rpt: 22/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/22/2025	5 Payee name Specs Wine Spirits	
6 Amount (\$) \$462.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2410 Smith St Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 HBAD Fall 2025 Social
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name TRU Insight MEDIA LLC		
Amount (\$) \$165.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6122 Grey Oaks Drive Houston, TX 77050	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name The Blank Canvas Space		
Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2955 GULF FREEWAY, HOUSTON, TX 77003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD Fall Fundraiser event space
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 F1: Sch: 10/12 Rpt: 23/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/05/2025	5 Payee name The BlankCanvas Space	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2955 Gulf freeway Houston, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense H-BAD Fall Social Deposit 2025
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2025	Payee name The BlankCanvas Space	
Amount (\$) \$1,287.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2955 Gulf freeway Houston, TX 77003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 HBAD 2025 Fall Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2025	Payee name The Fox Trap Restaurant & Lounge	
Amount (\$) \$240.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11470 Westheimer Rd, Houston, TX 77077	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Space for HBAD Politics Social Event
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 11/12 Rpt: 24/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 12/05/2025	5 Payee name USPS	
6 Amount (\$) \$264.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 9444 Cullen Blvd Houston, TX 77051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2025	Payee name Ward, Kenneth	
Amount (\$) \$355.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Service for HBAD 2025 Fall Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name Word Press	
Amount (\$) \$319.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 60 29th St #343 San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 12/12 Rpt: 25/25	2 FILER NAME Houston Black American Democrats Political Action	3 Filer ID (Ethics Commission Filers) 00027567
4 Date 11/15/2025	5 Payee name Zoom	
6 Amount (\$) \$106.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Alameda Blvd San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/16/2025	Candidate/Officeholder name Zoom	Office sought Office held
Amount (\$) \$106.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Alameda Blvd San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Recurring 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 Recurring Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		