

**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) 00016232	2 Total pages filed: 8			
3 COMMITTEE NAME Texas Assn. Of Staffing PAC		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/22/2026 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 1401 Lavaca Street PMB 41511 Austin, TX 78701						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR 			FIRST David	MI	
	NICKNAME 	LAST Anderson	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4309 Yoakum Houston, TX 77006		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 4309 Yoakum Houston, TX 77006					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 521-6563					
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	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special				

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Texas Assn. Of Staffing PAC		13 FILER ID (Ethics Commission Filers) 00016232
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)	\$ 6,045.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,111.97
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.

David Anderson

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 8

17 COMMITTEE NAME Texas Assn. Of Staffing PAC	18 Filer ID (Ethics Commission Filers) 00016232
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" 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 checked="" 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 checked="" type="checkbox"/> SCHEDULE E: LOANS	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input checked="" 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	

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Texas Assn. Of Staffing PAC			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)
	7 Pledgor Address;		9 In-kind description (If applicable)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

**MONETARY SUPPORT FROM CORPORATION OR
LABOR ORGANIZATION****SCHEDULE C3**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C3: Sch: 1/1 Rpt: 5/8
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 12/03/2025	5 Corporation / Labor Organization name Allegiance Staffing	6 Amount (\$) 150.00
Date 10/03/2025	Corporation / Labor Organization name Allegiance Staffing	Amount (\$) 150.00
Date 11/24/2025	Corporation / Labor Organization name Avionte	Amount (\$) 750.00
Date 12/03/2025	Corporation / Labor Organization name Hawkins Personnel Group	Amount (\$) 150.00
Date 12/03/2025	Corporation / Labor Organization name Link Staffing	Amount (\$) 150.00
Date 11/20/2025	Corporation / Labor Organization name Right Path Insurance	Amount (\$) 3,000.00
Date 12/03/2025	Corporation / Labor Organization name Skilled Craftsmen of Texas	Amount (\$) 150.00
Date 10/20/2025	Corporation / Labor Organization name Tempworks	Amount (\$) 1,545.00

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 6/8
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt: 7/8	2 FILER NAME Texas Assn. Of Staffing PAC	3 Filer ID (Ethics Commission Filers) 00016232
4 Date 11/21/2025	5 Payee name Acenar Mexican Restaurant	
6 Amount (\$) 1,887.05 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 146 E Houston St San Antonio, TX 78305	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Down payment for PAC dinner.
Date 10/17/2025	Payee name Intuit	
Amount (\$) 46.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Avenue Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quick Book fees.
Date 10/08/2025	Payee name Saxon Public Affairs	
Amount (\$) 3,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1122 Colorado Suite 102 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) Lobbyist
Date 09/16/2025	Payee name Saxon Public Affairs	
Amount (\$) 3,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1122 Colorado Suite 102 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) Lobbyist

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 8/8	2 FILER NAME Texas Assn. Of Staffing PAC	3 Filer ID (Ethics Commission Filers) 00016232
4 Date 10/08/2025	5 Payee name Saxon Public Affairs	
6 Amount (\$) 3,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1122 Colorado Suite 102 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) Lobbyist
Date 11/14/2025	Payee name Saxon Public Affairs	
Amount (\$) 3,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1122 Colorado Suite 102 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) Lobbyist
Date 12/11/2025	Payee name Saxon Public Affairs	
Amount (\$) 3,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1122 Colorado Suite 102 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) Lobbyist