

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00067374	2 Total pages filed: 15				
3 COMMITTEE NAME Cypress-Tomball Democrats			<b>OFFICE USE ONLY</b>				
			Date Received ELECTRONICALLY FILED 01/28/2026				
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 12215 Moorcreek Drive  Houston, TX 77070		Date Hand-delivered or Date Postmarked				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Carol	MI	Receipt # Amount			
	NICKNAME	LAST Gray	SUFFIX	Date Processed			
				Date Imaged			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 12215 Moorcreek Drive  Houston, TX 77070						
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 12215 Moorcreek Drive  Houston, TX 77070						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(281)	435-2742					
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)						
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input checked="" type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5						
11 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	12/26/2025				01/25/2026		

**GO TO PAGE 2**

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cypress-Tomball Democrats	<b>13 Filer ID</b> (Ethics Commission Filers) 00067374
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,651.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 1,080.55
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 15,208.42
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Carol Gray  
\_\_\_\_\_  
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 - MPAC

<b>17 COMMITTEE NAME</b> Cypress-Tomball Democrats		<b>18 Filer ID</b> (Ethics Commission Filers) 00067374
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,651.00
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	\$ 1,080.55
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/8 Rpt: 4/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baldwin, Shannon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77396	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Judge		<b>9</b> Employer (See Instructions) Harris County
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrett, Angela <hr/> Contributor address; City; State; Zip Code  Houston, TX 77095	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boldt, Elizabeth <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77375	Amount of Contribution (\$)  \$28.50
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Harris County Democratic Party
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boswell, Margarette <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowen, Jordan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77059	Amount of Contribution (\$)  \$28.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Chartwells

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/8 Rpt: 5/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowen, Jordan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77023	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Campaign Manager		<b>9</b> Employer (See Instructions) Yellow Dog Campaigns
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brunzman, Steven <hr/> Contributor address; City; State; Zip Code  Houston, TX 77070	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaya, Jane <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77377	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Stephanie <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeLeon, Timothy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77095	Amount of Contribution (\$)  \$120.00
Principal occupation / Job title (See Instructions) Archtxit		Employer (See Instructions) Tpc

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/8 Rpt: 6/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dotson, Regina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cypress, TX 77429	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gannon, MaryAnna <hr/> Contributor address; City; State; Zip Code  Houston, TX 77069	Amount of Contribution (\$)  \$22.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Sylvia <hr/> Contributor address; City; State; Zip Code  Houston, TX 77429	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) U S Representative (Congresswoman)		Employer (See Instructions) US
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hailey, Sheridan <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$25.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanus, Kay <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/8 Rpt: 7/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/07/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Humble Area Democrats <hr/> <b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77346	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keels, Rebecca <hr/> Contributor address; City; State; Zip Code  Houston, TX 77040	Amount of Contribution (\$)  \$125.50
Principal occupation / Job title (See Instructions) Substitute		Employer (See Instructions) CFISD
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemons, Jill <hr/> Contributor address; City; State; Zip Code  Houston, TX 77065	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) HR Analyst		Employer (See Instructions) Strada Global
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewandowski, Theresa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77064	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Magyari, Patricia <hr/> Contributor address; City; State; Zip Code  Magnolia, TX 77355	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/8 Rpt: 8/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maner, Carol Ann <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77095	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Social Worker		<b>9</b> Employer (See Instructions) Gambling Clinic of Texas, LLC
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Miguel <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) TD Consulting
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCoy, Bruce <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77377	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Brian <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Molnar, Andrea <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77377	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/8 Rpt: 9/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Jill <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tomball, TX 77375	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Linda <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Price, Walter <hr/> Contributor address; City; State; Zip Code  Houston, TX 77095	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) NSA Quad Plus
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Radspinner, Mary <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Music Teacher		Employer (See Instructions) Self
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Marcos <hr/> Contributor address; City; State; Zip Code  Houston, TX 77064	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) AML Analyst		Employer (See Instructions) First Service Credit Union

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/8 Rpt: 10/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shellenberger, Janet <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77070	<b>7</b> Amount of Contribution (\$)  \$25.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suss, Mary <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77375	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, David <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77375	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trejo, Susan <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Splash Irrigation
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whittle, Mike <hr/> Contributor address; City; State; Zip Code  Houston, TX 77069	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/8 Rpt: 11/15
<b>2</b> FILER NAME Cypress-Tomball Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whittle, Robin	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$30.00</span>
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77069		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wysong, Jason	Amount of Contribution (\$) <span style="float: right;">\$30.00</span>
Contributor address; City; State; Zip Code  Spring, TX 77380		
Principal occupation / Job title (See Instructions) Project management		Employer (See Instructions) Conzor

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 12/15	<b>2</b> FILER NAME Cypress-Tomball Democrats	<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 12/31/2025	<b>5</b> Payee name ActBlue Technical Services	
<b>6</b> Amount (\$) \$3.57  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 366 Summer Street  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/07/2026	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$2.38  <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer Street  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2026	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$7.14  <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer Street  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees
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.

<b>1</b>	Total pages Schedule F1: Sch: 2/4 Rpt: 13/15	<b>2</b>	FILER NAME Cypress-Tomball Democrats	<b>3</b>	Filer ID (Ethics Commission Filers) 00067374		
<b>4</b>	Date 01/22/2026	<b>5</b>	Payee name ActBlue Technical Services				
<b>6</b>	Amount (\$) \$44.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b>	Payee address; City; State; Zip Code 366 Summer Street  Somerville, MA 02144				
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees	
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
	Date 01/14/2026		Payee name CVS Pharmacy				
	Amount (\$) \$37.28  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 12550 Louetta Rd  Cypress, TX 77429				
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting refreshments	
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
	Date 01/20/2026		Payee name H-E-B				
	Amount (\$) \$34.86  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 10919 Louetta  Houston, TX 77070				
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting refreshments	
<b>9</b>		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.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 14/15	<b>2</b> FILER NAME Cypress-Tomball Democrats	<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/20/2026	<b>5</b> Payee name H-E-B	
<b>6</b> Amount (\$) \$79.68  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 10919 Louetta  Houston, TX 77070	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Potted plants
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name H-E-B	
Amount (\$) \$223.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10919 Louetta  Houston, TX 77070	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday social
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2025	Payee name Intuit Mailchimp	
Amount (\$) \$47.97  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 N Angier Ave. NE  Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emailing
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  
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.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 15/15	<b>2</b> FILER NAME Cypress-Tomball Democrats	<b>3</b> Filer ID (Ethics Commission Filers) 00067374
<b>4</b> Date 01/08/2026	<b>5</b> Payee name Lakewood Residents Club	
<b>6</b> Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 15006 Lakewood Forest Dr  Houston, TX 77070	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday social
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name Lakewood Residents Club	
Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15006 Lakewood Forest Dr  Houston, TX 77070	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting facility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name National Archives Store	
Amount (\$) \$199.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 700 Pennsylvania Ave NW  Washington , DC 20408	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday social
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held