

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

|   |  |  |                                  |
|---|--|--|----------------------------------|
| <b>The GPAC Instruction Guide explains how to complete this form.</b>                         |  | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00088983  | <b>2 Total pages filed:</b><br>6 |
| <b>3 COMMITTEE NAME</b><br>Southeast Democrats Network PAC                                    |  | <b>OFFICE USE ONLY</b>   |                                  |
|   |  | Date Received<br>ELECTRONICALLY FILED<br>03/25/2026  |                                  |
| <b>4 COMMITTEE ADDRESS</b><br><br><input type="checkbox"/> Change of Address                  |  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>2801 Ruth St.<br><br>Houston, TX 77004   |                                  |
|   |  | Date Hand-delivered or Date Postmarked   |                                  |
|   |  | Receipt #  | Amount                           |
|   |  | Date Processed   |                                  |
|   |  | Date Imaged  |                                  |
| <b>5 CAMPAIGN TREASURER NAME</b>  |  | MS / MRS / MR FIRST MI<br>Ms. Pamela<br><br>NICKNAME LAST SUFFIX<br>Davis  |                                  |
| <b>6 CAMPAIGN TREASURER STREET ADDRESS</b><br><small>(Residence or Business)</small>          |  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>3022 Hartsville Rd.<br><br>Houston, TX 77051  |                                  |
| <b>7 CAMPAIGN TREASURER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address |  | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3022 Hartsville Rd.<br><br>Houston, TX 77051   |                                  |
| <b>8 CAMPAIGN TREASURER PHONE</b>   |  | AREA CODE PHONE NUMBER EXTENSION<br>(713) 702-5023   |                                  |
| <b>9 REPORT TYPE</b>  |  | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |                                  |
| <b>10 PERIOD COVERED</b>  |  | Month Day Year      Month Day Year<br>07/01/2025      THROUGH      12/31/2025  |                                  |
| <b>11 ELECTION</b>  |  | ELECTION DATE      ELECTION TYPE<br>Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><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

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Southeast Democrats Network PAC | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00088983 |
|---|---|

|   |  |              |
|---|--|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(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><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ | 0.00  |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ | 0.00  |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>   | \$ | 0.00  |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>  | \$ | 0.00  |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ | 60.00 |
| 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.

Ms. Pamela Davis  
\_\_\_\_\_  
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

|   |   |   |
|---|---|---|
| <b>17 COMMITTEE NAME</b><br>Southeast Democrats Network PAC |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00088983 |
| <b>19 SCHEDULE SUBTOTALS</b>                                |   | SUBTOTAL AMOUNT   |
|   | NAME OF SCHEDULE  |   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 0.00   |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                   | \$ 0.00   |
| 3.  | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$ 60.00  |
| 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 checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 0.00   |
| 10.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$ 0.00   |
| 11.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                      | \$ 0.00   |
| 12.   | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS             | \$ 0.00   |
| 13.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                 | \$ 0.00   |
| 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       | \$  |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

|  |  |  |  |
|--|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule B:<br>Sch: 1/2 Rpt: 4/6    |  |
| <b>2</b> FILER NAME<br>Southeast Democrats Network PAC           |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088983 |  |
| <b>4</b> TOTAL OF UNITEMIZED PLEDGES                             |  | <b>\$</b> 0.00   |  |
| <b>5</b> Date<br><br>12/15/2025                                  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kimberly, Itch | <b>8</b> Amount of pledge (\$)<br><br>\$10.00            | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code<br><br>Houston, TX 77021                               |  |  |
| <b>10</b> Principal occupation / Job title (See Instructions)    |  | <b>11</b> Employer (See Instructions)                    |  |
| <b>5</b> Date<br><br>11/15/2025                                  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kimberly, Itch | <b>8</b> Amount of pledge (\$)<br><br>\$10.00            | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code<br><br>Houston, TX 77021                               |  |  |
| <b>10</b> Principal occupation / Job title (See Instructions)    |  | <b>11</b> Employer (See Instructions)                    |  |
| <b>5</b> Date<br><br>10/15/2025                                  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kimberly, Itch | <b>8</b> Amount of pledge (\$)<br><br>\$10.00            | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code<br><br>Houston, TX 77021                               |  |  |
| <b>10</b> Principal occupation / Job title (See Instructions)    |  | <b>11</b> Employer (See Instructions)                    |  |
| <b>5</b> Date<br><br>09/15/2025                                  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kimberly, Itch | <b>8</b> Amount of pledge (\$)<br><br>\$10.00            | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code<br><br>Houston, TX 77021                               |  |  |
| <b>10</b> Principal occupation / Job title (See Instructions)    |  | <b>11</b> Employer (See Instructions)                    |  |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 2/2 Rpt: 5/6

2 FILER NAME  
Southeast Democrats Network PAC

3 Filer ID (Ethics Commission Filers)  
00088983

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date  
08/15/2025

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)  
Kimberly, Itch

7 Pledgor Address; City; State; Zip Code

Houston, TX 77021

8 Amount of pledge (\$)  
\$10.00

9 In-kind description (If applicable)

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

5 Date  
08/15/2025

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)  
Kimberly, Itch

7 Pledgor Address; City; State; Zip Code

Houston, TX 77021

8 Amount of pledge (\$)  
\$10.00

9 In-kind description (If applicable)

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 6/6  |
| <b>2</b> FILER NAME<br>Southeast Democrats Network PAC                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088983   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | <b>\$</b> 0.00   |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)   |
|  | <b>18</b> Guarantor address; City; State; Zip Code                             |  |
| <b>20</b> Principal occupation   |  | <b>21</b> Employer (See Instructions)  |