

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

| | | | |
|--|---|--|---|
| 1 Filer ID (Ethics Commission Filers) 00067374 | 2 Total pages filed: 19 | OFFICE USE ONLY | |
| 3 COMMITTEE NAME Cypress-Tomball Democrats | | | Date Received ELECTRONICALLY FILED 04/06/2026 |
| 4 TREASURER NAME Gray, Carol | | | Date Hand-delivered or Date Postmarked |
| 5 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | Receipt # |
| | <input type="checkbox"/> July 15 | <input type="checkbox"/> 10th day after campaign treasurer resignation | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution report | Amount |
| | <input type="checkbox"/> 8th day before election | <input checked="" type="checkbox"/> Other (specify) <u>April 5</u> | Date Processed |
| 6 ORIGINAL PERIOD COVERED | Month Day Year 02/26/2026 | THROUGH | Month Day Year 03/25/2026 |
| Date Imaged | | | |

7 EXPLANATION OF CORRECTION
 One expense for advertising was inadvertently omitted. Note that TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD is correct as originally reported. The Error Check function did not catch the imbalance.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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: 19 | | |
| 3 COMMITTEE NAME Cypress-Tomball Democrats | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 04/06/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | | |
| 4 COMMITTEE ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 12215 Moorcreek Drive Houston, TX 77070 | | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Carol | | | MI |
| | NICKNAME | LAST Gray | | | SUFFIX |
| 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 checked="" type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input 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 02/26/2026 | | THROUGH | Month Day Year 03/25/2026 | |

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

| | |
|---|---|
| 12 COMMITTEE NAME Cypress-Tomball Democrats | 13 Filer ID (Ethics Commission Filers) 00067374 |
|---|---|

| | | |
|---|--|--------------|
| 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 type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1,443.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 7,237.51 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 11,568.09 |
| 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.

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

| | | |
|---|---|---|
| 17 COMMITTEE NAME Cypress-Tomball Democrats | | 18 Filer ID (Ethics Commission Filers) 00067374 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,443.00 |
| 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 | \$ 7,237.51 |
| 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: 1/11 Rpt: 5/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amieva, Sylvia <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Office Manager | | 9 Employer (See Instructions) JLR Plumbing |
| Date 03/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Alice <hr/> Contributor address; City; State; Zip Code Deer Park, TX 77539 | Amount of Contribution (\$) \$28.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Leigh <hr/> Contributor address; City; State; Zip Code Houston, TX 77084 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Self-Employed | | Employer (See Instructions) Leigh Anderson |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayers, Susan <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377 | Amount of Contribution (\$) \$51.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/11 Rpt: 6/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backo, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benz, Kathy <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 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, Jeffrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77065 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Self-Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Michelle <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429 | Amount of Contribution (\$) \$64.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bressie, Robin <hr/> Contributor address; City; State; Zip Code Houston, TX 77040 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/11 Rpt: 7/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/18/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burg, Claudia <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433 | 7 Amount of Contribution (\$) \$53.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhardt, Cindy <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhardt, Cindy <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 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Herlinde <hr/> Contributor address; City; State; Zip Code Spring, TX 77379 | Amount of Contribution (\$) \$51.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coates, Karen <hr/> Contributor address; City; State; Zip Code Spring, TX 77389 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/11 Rpt: 8/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Steve | 7 Amount of Contribution (\$) \$30.00 |
| 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruzen, Kathryn | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Cypress, TX 77429 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Blake | Amount of Contribution (\$) \$25.50 |
| Contributor address; City; State; Zip Code Tomball, TX 77375 | | |
| Principal occupation / Job title (See Instructions) Video Editor | | Employer (See Instructions) Self-Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffield, Susan | Amount of Contribution (\$) \$25.50 |
| Contributor address; City; State; Zip Code Houston, TX 77070 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eidswick, Sandra | Amount of Contribution (\$) \$25.50 |
| Contributor address; City; State; Zip Code Pinehurst, TX 77362 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/11 Rpt: 9/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/18/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Cathy <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Debbie <hr/> Contributor address; City; State; Zip Code Houston, TX 77070 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetner, Kathy <hr/> Contributor address; City; State; Zip Code Houston, TX 77069 | Amount of Contribution (\$) \$28.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald , Dennis <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald , Dennis <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/11 Rpt: 10/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Tara | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77069 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/25/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Madeline | Amount of Contribution (\$) \$30.00 |
| Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, Patsy | Amount of Contribution (\$) \$25.50 |
| Contributor address; City; State; Zip Code Cypress, TX 77429 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Susan | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Tomball, TX 77377 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanus, Tim | Amount of Contribution (\$) \$83.00 |
| Contributor address; City; State; Zip Code Cypress, TX 77429 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/11 Rpt: 11/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/18/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, MA <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77041 | 7 Amount of Contribution (\$) \$27.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/04/2026 | 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 (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krahn, Jeffrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77040 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Healthcare | | Employer (See Instructions) PAR Excellence |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauersdorf, Debra <hr/> Contributor address; City; State; Zip Code Houston, TX 77070 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Education | | Employer (See Instructions) Tomball ISD |
| Date 03/04/2026 | 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 (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) HR Analyst | | Employer (See Instructions) Strada Global |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/11 Rpt: 12/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahan, Robert <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maner, Carol Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77095 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Social Worker | | Employer (See Instructions) Gambling Clinic of Texas, LLC |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Alana <hr/> Contributor address; City; State; Zip Code Houston, TX 77069 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Alana <hr/> Contributor address; City; State; Zip Code Houston, TX 77069 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Alana <hr/> Contributor address; City; State; Zip Code Houston, TX 77069 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/11 Rpt: 13/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monita, Velma <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77377 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Teresa <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) NA |
| Date 03/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pilkinton, Cheryl <hr/> Contributor address; City; State; Zip Code Spring, TX 77389 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, Irene <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 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, Robert <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Seatrax, Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/11 Rpt: 14/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/18/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Brett <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Ron <hr/> Contributor address; City; State; Zip Code Spring, TX 77388 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Busser | | Employer (See Instructions) Torchy's Tacos |
| Date 03/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Scott <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabassi, Reza <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377 | Amount of Contribution (\$) \$51.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/18/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willians, Alisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77241 | Amount of Contribution (\$) \$25.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/11 Rpt: 15/19 |
| 2 FILER NAME Cypress-Tomball Democrats | | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/11/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zawitkowski, Ernestine <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |

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.

| | | |
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| 1 Total pages Schedule F1: Sch: 1/4 Rpt: 16/19 | 2 FILER NAME Cypress-Tomball Democrats | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/04/2026 | 5 Payee name ActBlue Technical Services | |
| 6 Amount (\$) \$19.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144 | |
| 8 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 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/11/2026 | Payee name ActBlue Technical Services | |
| Amount (\$) \$6.56 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 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 ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/18/2026 | Payee name ActBlue Technical Services | |
| Amount (\$) \$29.30 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 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 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)

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|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 2/4 Rpt: 17/19 | 2 FILER NAME Cypress-Tomball Democrats | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 03/25/2026 | 5 Payee name ActBlue Technical Services | |
| 6 Amount (\$) \$1.19 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144 | |
| 8 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 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/26/2026 | Payee name C&H Transportation | |
| Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6413 W Sam Houston Pkwy N Houston, TX 77041 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Charter bus to protest event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/05/2026 | Payee name Harris County Democratic Party | |
| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 HCDC Ad |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/4 Rpt: 18/19 | 2 FILER NAME Cypress-Tomball Democrats | 3 Filer ID (Ethics Commission Filers) 00067374 |
| 4 Date 02/27/2026 | 5 Payee name Intuit Mailchimp | |
| 6 Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Emailing |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 03/02/2026 | Candidate/Officeholder name Office sought Office held | |
| 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 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Emailing |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 03/10/2026 | Candidate/Officeholder name Office sought Office held | |
| Payee name Office Depot | | |
| Amount (\$) \$266.68 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 25821 Highway 290 Cypress, TX 77429 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Name badges |
| Complete ONLY 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.

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| 1 Total pages Schedule F1: Sch: 4/4 Rpt: 19/19 | 2 FILER NAME Cypress-Tomball Democrats | 3 Filer ID (Ethics Commission Filers) 00067374 |
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|-----------------------------|---------------------------------------|
| 4 Date 02/27/2026 | 5 Payee name Outfront Media |
|-----------------------------|---------------------------------------|

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|---|---|
| 6 Amount (\$) \$4,971.25 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1600 Studemont St Houston, TX 77070 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Billboard sign |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/12/2026 | Payee name Stellar Customs LLC |
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| Amount (\$) \$597.54 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 13622 Balmor Circle Houston, TX 77069 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Club t-shirts, caps |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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