

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 2em; margin-left: 20px;">15</span>
3 COMMITTEE NAME  <span style="font-size: 1.5em;">Citizens for CFISD Proven Leaders</span>		<b>OFFICE USE ONLY</b>	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  <span style="font-size: 1.2em;">5315-B Cypress Creek Pkwy #350 Houston, TX 77069</span>		Date Received  <span style="font-size: 1.5em;">RECEIVED</span>  OCT 04 2021  BY: <u>JK</u> 12:50PM
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI  <span style="font-size: 1.2em;">Mrs. Darcy</span>	Date Hand-delivered or Date Postmarked	
	NICKNAME LAST SUFFIX  <span style="font-size: 1.2em;">Mingoia</span>	Receipt #	Amount \$
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <span style="font-size: 1.2em;">6610 Barrington Garden Houston, Tx 77069</span>		Date Processed
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  <span style="font-size: 1.2em;">6610 Barrington Garden Houston, Tx 77069</span>		Date Imaged
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  <span style="font-size: 1.2em;">(713) 859-0030</span>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution Report (Attached PAC-FR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year      THROUGH      Month Day Year <span style="font-size: 1.2em;">08/05/2021      09/23/2021</span>		
11 ELECTION	ELECTION DATE Month Day Year  <span style="font-size: 1.2em;">11/02/2021</span>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special      Description _____	

**GO TO PAGE 2**

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC  
COVER SHEET PG 2

12 COMMITTEE NAME Citizens for CFISD Proven Leaders 13 Filer ID (Ethics Commission Filers)

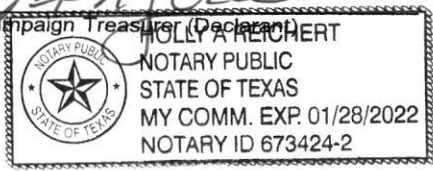
<b>14 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME <u>John Ogletree, Don Ryan + Bob R. Covey</u>
	<input checked="" type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <u>CFISD Board of Trustees</u> <u>Positions 5, 6 + 7, respectively</u>
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # _____ ELECTION DATE _____ Month Day Year / /
	DESCRIPTION	_____

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 150.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,148.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 17,006.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,291.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 SIGNATURE 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.

Darcy Mingeia  
Signature of Campaign Treasurer (Declarant)

Please complete either option below:



(1) Affidavit

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Darcy Mingeia, this the 4th day of October, 2021, to certify which, witness my hand and seal of office.

Holly A. Reichert Signature of officer administering oath  
Holly A. Reichert Printed name of officer administering oath  
Notary Public Title of officer administering oath

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_  
 My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code)(country)  
 Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
 (month) (year)

Signature of Campaign Treasurer (Declarant)

# SUBTOTALS - SPAC

FORM SPAC  
COVER SHEET PG 3

17 COMMITTEE NAME <i>Citizens for CFISD Proven Leaders</i>	18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>18,298.00</i>
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>219.85</i>
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0.00</i>
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ <i>0.00</i>
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ <i>0.00</i>
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$ <i>0.00</i>
7. <input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>0.00</i>
8. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>17,006.94</i>
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0.00</i>
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0.00</i>
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0.00</i>
12. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0.00</i>
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0.00</i>
14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0.00</i>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: *10 of 10*

2 FILER NAME  
*Citizens for CFISD Proven Leaders*

3 Filer ID (Ethics Commission Filers)

4 Date  
*8/5/21*

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Darcy Mingoia*

7 Amount of contribution (\$)  
*1,000.00*

6 Contributor address; City; State; Zip Code  
*6610 Barrington Garden Houston TX 77069*

8 Principal occupation / Job title (See Instructions)  
*Retired*

9 Employer (See Instructions)  
*Retired*

Date  
*8/5/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Matt Milks*

Amount of contribution (\$)  
*350.00*

Contributor address; City; State; Zip Code  
*13903 Blanco Falls Lane Cypress TX 77429*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
*8/5/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Butch Milks*

Amount of contribution (\$)  
*350.00*

Contributor address; City; State; Zip Code  
*8525 Westland West Blvd. Houston TX 77041*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
*8/10/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Mary Kay Milks*

Amount of contribution (\$)  
*300.00*

Contributor address; City; State; Zip Code  
*16205 Acapulco Houston TX 77040*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
10 2 of 10

2 FILER NAME  
*Citizens for CFISD Proven Leaders*

3 Filer ID (Ethics Commission Filers)

4 Date  
*8/10/21*

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Darry Mingoia*

7 Amount of contribution (\$)  
*100.00*

6 Contributor address; City; State; Zip Code  
*6610 Burlington Garden Houston TX 77069*

8 Principal occupation / Job title (See Instructions)  
*Retired*

9 Employer (See Instructions)  
*Retired*

Date  
*8/12/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Bob R. Covey*

Amount of contribution (\$)  
*1,000.00*

Contributor address; City; State; Zip Code  
*17110 Ledgetfield Cypress TX 77433*

Principal occupation / Job title (See Instructions)  
*Inside sales*

Employer (See Instructions)  
*American Alloy steel*

Date  
*8/12/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Mary H. Smith*

Amount of contribution (\$)  
*500.00*

Contributor address; City; State; Zip Code  
*11627 Vailtran Drive Houston TX 77070*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
*8/22/21*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
*Anne Manning*

Amount of contribution (\$)  
*1,200.00*

Contributor address; City; State; Zip Code  
*58 Windcrest Falls Drive Cypress TX 77429*

Principal occupation / Job title (See Instructions)  
*Retired*

Employer (See Instructions)  
*Retired*

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
10 3 of 10

2 FILER NAME  
Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date  
8/23/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
William A. Schwartz

7 Amount of contribution (\$)  
499.00

6 Contributor address; City; State; Zip Code  
13303 Pebblebrook Drive Houston TX 77079

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
8/24/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jim Wells

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
15503 Rippling Springs Drive Cypress TX 77429

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
8/27/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Randy Sparks

Amount of contribution (\$)  
1,500.00

Contributor address; City; State; Zip Code  
2902 Sundance Summit Lane Katy, TX 77494

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Brooks & Sparks, Inc.

Date  
8/27/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Robert J. Adam

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
13218 Pine Drive Cypress TX 77429

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

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2 FILER NAME

Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date

8/27/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

John Ogletree

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

8131 Sun Terrace Lane Houston TX 77095

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/30/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DIG-PAC

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

3375 Westpark Drive, Ste 224 Houston TX 77005

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/30/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Brandon D. Ross

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

10011 Olympia Drive Houston TX 77042

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/30/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Roy F. Montalbano

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

355 Knipp Road Houston TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
10 of 10

2 FILER NAME  
Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date  
8/30/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Lisa Schwartz

7 Amount of contribution (\$)  
499.00

6 Contributor address; City; State; Zip Code  
13303 Pebblebrook Drive Houston TX 77079

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
8/30/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Wesley Don Ryan, Jr.

Amount of contribution (\$)  
1,000.00

Contributor address; City; State; Zip Code  
12706 Timberland Trace Houston TX 77065

Principal occupation / Job title (See Instructions)  
owner

Employer (See Instructions)  
Cy-Fair Insurance Group

Date  
8/30/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
HF Schneider, III

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
2215 Shade Crest Drive Richmond TX 77406

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
8/31/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Sarah A. Harty

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
16514 Torry View Terrace Houston TX 77095

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

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1 Total pages Schedule A1:  
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2 FILER NAME  
Citizens for CFBD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date  
8/31/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Christopher Cunico

7 Amount of contribution (\$)  
500.00

6 Contributor address; City; State; Zip Code  
3 Prato Park Drive Missouri City TX 77459

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

8/31/21

Dan Boggio  
Contributor address; City; State; Zip Code  
11 Greenway Plaza Houston TX 77046  
22nd Floor

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

9/2/21

Debbie Blackshear  
Contributor address; City; State; Zip Code  
17415 Swansbury Cypress TX 77429  
Drive

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

9/2/21

Tony Barcelona  
Contributor address; City; State; Zip Code  
14303 Millstone Estates Cypress TX 77429  
Lane

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
10 of 10

2 FILER NAME  
Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date  
9/2/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Harold Rowe

7 Amount of contribution (\$)  
300.00

6 Contributor address; City; State; Zip Code  
32710 Whitehaven Fulshear TX 77441  
Place

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
9/2/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Sheri Stice

Amount of contribution (\$)  
300.00

Contributor address; City; State; Zip Code  
12919 Earlywood Cypress TX 77429  
Lane

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
9/2/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ian Powell

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
3939 W Alabama Houston TX 77027  
St # 455

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
9/2/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
R.K. Chi

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
4408 Camellia Bellaire TX 77401  
Lane

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>10 8 of 10</i>
2 FILER NAME <i>Citizens for CFISD Proven Leaders</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/4/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>B. Annie-Jean Maclean</i>	7 Amount of contribution (\$)  <i>1,000.00</i>
6 Contributor address; City; State; Zip Code <i>14018 Conway Place Cypress TX 77429</i>		
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>
Date <i>9/5/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joseph Janer</i>	Amount of contribution (\$)  <i>100.00</i>
Contributor address; City; State; Zip Code <i>10106 East Frio River Circle Cypress TX 77433</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>9/8/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Garry E. Brister</i>	Amount of contribution (\$)  <i>100.00</i>
Contributor address; City; State; Zip Code <i>12922 Raven South Cypress TX 77429</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>9/11/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Audrey F. Ayers</i>	Amount of contribution (\$)  <i>500.00</i>
Contributor address; City; State; Zip Code <i>403 Willow Pointe Drive League TX 77573</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

10 9 of 10

2 FILER NAME

Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date

9/11/21

5 Full name of contributor

Donna Kay Range

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

500.00

6 Contributor address;

3636 West Clay Road

City;

Houston TX

State;

Zip Code

77019

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/13/21

Full name of contributor

Fred Bentsen

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

22038 Summer Shower Court

City;

Cypress TX

State;

Zip Code

77433

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/16/21

Full name of contributor

Eric Smith

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

20029 Nichols Road

City;

Hockley TX

State;

Zip Code

77447

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/21

Full name of contributor

Gerald Dasbach

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

95 Manor Lake Estates Drive

City;

Spring TX

State;

Zip Code

77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
10 10 of 10

2 FILER NAME  
Citizens for CFISD Proven Leaders

3 Filer ID (Ethics Commission Filers)

4 Date  
9/18/21

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dawn Seiffert

7 Amount of contribution (\$)  
250.00

6 Contributor address; City; State; Zip Code  
12526 Brook Cove Drive Cypress TX 77433

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
9/23/21

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Tana Lam

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
12306 Banyan Cove Court Cypress TX 77433

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Citizens for CFISD Proven Leaders</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>8/5/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Darcy Mingoria</u>	8 Amount of Contribution \$ <u>130.00</u>	9 In-kind contribution description <u>P.O. Box Rental</u>
7 Contributor address; City; State; Zip Code <u>6610 Battrington Garden Houston TX 77069</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <u>Retired</u>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <u>Retired</u>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <u>9/17/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Darcy Mingoria</u>	Amount of Contribution \$ <u>89.85</u>	In-kind contribution description <u>Copies of Flyers</u>
Contributor address; City; State; Zip Code <u>6610 Battrington Garden Houston TX 77069</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <u>Retired</u>		Employer (FOR NON-JUDICIAL) (See Instructions) <u>Retired</u>	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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.

<b>1</b> Total pages Schedule F1: <i>1</i>	<b>2</b> FILER NAME <i>Citizens for CFISD Proven Leaders</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>8/27 + 9/20/21</i>	<b>5</b> Payee name <i>J6 Media/Community Impact News</i>	
<b>6</b> Amount (\$) <i>4,430.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>3600 E. Palm Valley Blvd, Box #3 Round Rock, TX 78665</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description <i>September + October Ads in Community Impact News</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <i>9/23/21</i>	<b>Payee name</b> <i>Majority Strategies LLC</i>	
<b>Amount (\$)</b> <i>12,512.24</i>	<b>Payee address; City; State; Zip Code</b> <i>P.O. Box 679219 Dallas, TX 75267</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>Description</b> <i>Facebook + Website Design, social Media Ad + Direct Mail Piece</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <i>Various</i>	<b>Payee name</b> <i>Anedot</i>	
<b>Amount (\$)</b> <i>64.70</i>	<b>Payee address; City; State; Zip Code</b> <i>1920 McKinney Avenue 7th Floor Dallas TX 75201</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Accounting/Banking</i>	<b>Description</b> <i>Credit Card Fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED