FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090444 3 COMMITTEE NAME **OFFICE USE ONLY** Stonewall Democrats of Austin Date Received **ELECTRONICALLY FILED** 10/26/2020 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 40898 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Rich NAME NICKNAME LAST **SUFFIX** Bailey STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7107 Tawny Cir STREET **ADDRESS** (Residence or Business) Austin, TX 78745 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 771-3538 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/25/2020 10/24/2020 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/03/2020 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME	of Austin			13 File		(Ethics Commission Filers)
Stonewall Democrats				000	90444	
4 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Democrat			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported	l			
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders	1				
	Assisted (Identify by name or, if applicable, classify by party.)					
L5 CONTRIBUTION TOTALS	PLEDGES, LOANS,	OR GUARAN	CONTRIBUTIONS (OTHER T TEES OF LOANS) higher itemization threshold	HAN	\$	60.00
	2. TOTAL POLITICA (OTHER THAN PLE		BUTIONS IS, OR GUARANTEES OF LO	OANS)	\$	60.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL	EXPENDITUR	ES OF \$100 OR LESS, UNLE	ESS ITEMIZED	\$	2.38
	4. TOTAL POLITICA	AL EXPENDI	TURES		\$	2,053.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		ONS MAINTAINED AS OF TH	E LAST DAY	\$	2,026.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL LAST DAY OF THE		ALL OUTSTANDING LOANS PERIOD	AS OF THE	\$	0.00
.6 AFFIDAVIT	<u>'</u>				<u> </u>	
			I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information		
				Rich Bailey		
			Signatu	ire of Campaign	Treasu	rer
AFFIX NOTA	RY STAMP / SEAL ABOVE					
Sworn to and subscrib	ped before me, by the said _			, this the		day
of	, 20, to certify	which, witness	s my hand and seal of office.			
Cignoture of officer	administoring anth	Drinted name	of officer administering seth	T:41.	of offi	or administaring acth
Signature of officer	administering oath	r iiiileu Iiaille	of officer administering oath	THUE	oi UIIIC	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

			Page 3 01 8
			13 Filer ID (Ethics Commission Filers)
Austin			00090444
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		rate:2020-11-03 Desc:Dedicating 8.75 Internance portion of the tax rate for
	B. Opposed		
Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
(Identify by name or, if			
	B. Opposed		
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	Ballot ID:COA Prop B Election D approved general obligation bon	ate:2020-11-03 Desc:\$460M in voterds for transportation infrastructure.
	B. Opposed		
Officeholders Assisted (Identify by name or, if			
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed B. Opposed B. Opposed Company of the party of the	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Ballot ID:COA Prop A Election D cents of the operations and mair Project Connect B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Ballot ID:COA Prop A Election D cents of the operations and mair Project Connect B. Opposed A. Supported B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported B. Opposed B. Opposed A. Supported Ballot ID:COA Prop B Election D approved general obligation bon logical papers of the operations and mair Project Connect B. Opposed

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			4 of 8				
17 COMMITT	(Ethics Commission Filers)						
	19 SCHEDULE SUBTOTALS						
NAME OF		SUBTOTAL AMOUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 60.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$				
9.	SCHEDULE E: LOANS		\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 2,053.25				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

(Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1 To	otal pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers))
	Sch: 1/4 Rpt: 5/8	:	Stonewall Democrats of Austin 00090444									
4 Da	ate	5	Payee name									
10	0/16/2020	l	Albert, Davi	d								
6 Ar	mount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					
	\$100.00	:	1101 Grove	Blvd #703								
	Expenditure from corporate funds		Austin, TX 7	8741								
8	PURPOSE OF	(a)	Category (Se	e Categories listed at th	ne top of this sche	edule)	(b)	Description				
E	EXPENDITURE			s/Donations Ma		i++ 0 0		=		de of Texas. Comp officeholder living		
		'	Candidate/C	Officeholder/Poli	ucai Commi	illee		Campaign co			expense	
								_ apaigi1 00				
9 C	omplete ONLY if direct		andidate/Offic	ceholder name		ffice sou	l laht			Office he	eld.	
	kpenditure to benefit C/OI		andidate/Office	seriolder flame			9111			Office fie	iu.	
Da	ate		Payee name									
10	0/05/2020	4	Alter, Alison									
Ar	mount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		P. O. Box 30	00572								
	Expenditure from corporate funds		Austin, TX 7	8703-0572								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this sche	edule)	(b)	Description				
E	OF EXPENDITURE	'	Contribution	s/Donations Ma	ıde By					de of Texas. Comp		
	- · · - ·	'	Candidate/C	Officeholder/Poli	tıcal Commi	ittee				officeholder living	expense	
								Campaign co	11(11	มนแบบ		
	omplete ONLV if direct		andidato/Offic	caholdar nama		office cou	abt			Office he	uld	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
												
	ate	l	Payee name	1								
	0/20/2020		Bailey, Rich									
Ar	mount (\$)	l	Payee addres		State;	Zip Co	de					
	\$50.87	'	7107 Tawny	' Cir								
<u> </u>	Expenditure from											
	corporate funds	4	Austin, TX 7	8745								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	ı	Printing Exp					ш		de of Texas. Comp		
	-A LINDITOIL									officeholder living		
								Reimburseme	ent	ioi printer in	IK	
	1	Ļ	P. I				<u> </u>			O		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held 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 Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

rsement Solicitation/Fundraising Expense

xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District

OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Takal manage Cabadala Edu	
1 Total pages Schedule F1:	
Sch: 2/4 Rpt: 6/8	Stonewall Democrats of Austin 00090444
4 Date	5 Payee name
10/05/2020	Casar, Greg
	<u> </u>
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	P. O. Box 301074
Expenditure from corporate funds	Austin, TX 78703-1074
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/05/2020	Chincanchan, David
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	4908 Parell Path
Expenditure from corporate funds	Austin, TX 78744
	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/05/2020	Flannigan, Jimmy
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	P. O. Box 301074
Expenditure from corporate funds	Austin, TX 78703-1074
	To a second seco
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Candidate/Onicenoider/Political Committee Campaign contribution
	Campaign continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 7/8	Stonewall Democrats of Austin Stonewall Democrats of Austin 00090444
4 Date	5 Payee name
10/16/2020	Lugo, Noelita
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	P. O. Box 1192
Expenditure from corporate funds	Manchaca, TX 78652-1192
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/16/2020	McKiernan-Gonzalez, John
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$100.00	3000 Matador Dr
Expenditure from	
corporate funds	Austin, TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Campaign contribution
	Campaign continuation
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
10/16/2020	Pantoja, Damian
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	2301 Grove Blvd #533
*=====	
Expenditure from	
corporate funds	Austin, TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 8/8	Stonewall Democrats of Austin 00090444
4 Date	5 Payee name
10/05/2020	Pool, Leslie
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	1101 W. 34th St #507
Expenditure from corporate funds	Austin, TX 78705
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/05/2020	Sethi, Pooja
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	7744 Yaupon Dr
Expenditure from corporate funds	Austin, TX 78759
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Experialtare to beliefit 5,5.	
Date	Payee name
10/05/2020	Travis County Democratic Party
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1311 E 6th St
Expenditure from corporate funds	Austin, TX 78702
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to beliefit C/O	· · · · · · · · · · · · · · · · · · ·