GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00051624				n Filers)	2	2 Total pages filed: 12		
3	COMMITTEE NAME						OFFICE USE ONLY	
	Independent Texa	ns PAC				Ļ		
						E	Date Received	
		r					04/25/2025	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	TY;	STATE;	ZIP CODE		Electronically received in office via email 4/25/2025 at 4:25 pm - VP	
	ADDRESS	P.O. Box 651					Date Hand-delivered or Date Postmarked	
							4/25/2025	
		Bastrop, TX 78602				F	Receipt # Amount	
							Date Processed	
							Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRST				M	II	
	TREASURER NAME	Linda						
		NICKNAME LAST				 S	UFFIX	
		Curtis						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		ΔΡΤ / 9	SUITE #; CITY	/.	STATE; ZIP CODE	
ľ	TREASURER	150 South Shore Road				,	STATE, ZII CODE	
	STREET	130 South Shore Road						
	ADDRESS							
	(Residence or Business)	Bastrop, TX 78602						
7		STREET OR PO BOX;		APT /	SUITE #; CIT	Υ;	STATE; ZIP CODE	
	TREASURER MAILING	150 South Shore Road						
	ADDRESS							
		Bastrop, TX 78602						
L	0.115 1 0.1							
8	CAMPAIGN TREASURER		EXI	ENSION				
	PHONE	(512) 657-2089						
L	DEDODT							
9	REPORT TYPE	January 15	0th d	ay before election	· [Dissolution (Attach PAC-DR)	
		X 8t	th da	y before election	1		10th day after campaign treasurer	
		July 15			L		termination	
			unof					
10	PERIOD	Month Day Year			Month Day		Year	
	COVERED	01/01/2025 TI	HRC	UGH	04/23/20	25		
11	ELECTION	ELECTION DATE			ELECTION TYPE			
		Month Day Year	Prima	ry	Runoff		Other	
		05/03/2025	Gene	ral	Special			
			00110					
⊢								
	GO TO PAGE 2							
Fo	rms provided by Tex	xas Ethics Commission www.e	thics	s.state.tx.us			Version V4.1.0.e02d6221	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Independent Texans PA	AC		00051624	1		
14 COMMITTEE ACTIVITY	1. Candidates	A. Supported Cecilia Serna Bastrop City Co	uncil Place 1	L		
Activity	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	370.00		
	2. TOTAL POLITICA		\$	1 005 00		
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	Ŷ	1,025.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,057.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	723.00		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT	1					
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		Linda	a Curtis			
		Signature of Ca	mpaign Treas	urer		
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed	before me, by the said	, t	his the	day		
		which, witness my hand and seal of office.				
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of off	icer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.e02d6221		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 12

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Independent Texans PA	AC			00051624	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Cheryl Lee Bastrop City Council	, Place 5	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ward Northcutt Mayor of City of	Bastrop	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	John Kirkland Bastrop City Cour	ncil, Place 5	
	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.)				
		1			

FORM GPAC COVER SHEET PG 3

4	of	12	

17.00					
		EE NAME ent Texans PAC	18 Filer ID 00051624	(Ethics C	ommission Filers)
	HEDULE ME OF S	SUE	BTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,025.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	325.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	IR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
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.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,057.00
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 CONTRIBUTIO	ONS	\$	
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	197.00

SUBTOTALS - GPAC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/12 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Independent Texans PAC 00051624 4 Date Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 7 02/06/2025 \$505.00 Loucks, Don 6 Contributor address; City; State; Zip Code PO Box 1836 Bastrop, TX 78602 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) retired na Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 03/19/2025 \$150.00 Russell, Deborah Contributor address; City; State; Zip Code 835 Royal Lakes Blvd Richmond, TX 77469 Principal occupation / Job title (See Instructions) Employer (See Instructions) retired na

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/12 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Independent Texans PAC 00051624 4 325.00 TOTAL OF UNITEMIZED PLEDGES \$ In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9) (If applicable) pledge (\$) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Sch: 1/5 Rpt: 7/12	Independent Texans PAC		00051624			
4 Date	5 Payee name					
01/04/2025	Amazon					
6 Amount (\$)	7 Payee address; City; St	ate; Zip Code				
\$43.00	410 Terry Ave. N					
Expenditure from corporate funds	Seattle, WA 98109					
8 PURPOSE	(a) Category (See Categories listed at the top of this	s schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T.			
		office supplie	, TX, officeholder living expense			
			5			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held			
Date	Payee name					
04/15/2025	Bastrop Copier					
Amount (\$)	Payee address; City; St	ate; Zip Code				
\$54.00	1002 Main St					
Expenditure from corporate funds	Bastrop, TX 78602					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense a			
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held			
expenditure to benefit C/OI		Once sought	Once neu			
Date						
04/16/2025	Payee name Bastrop Copier					
	• •	ata Zin Orda				
Amount (\$)	3	ate; Zip Code				
\$248.00	1002 Main St					
Expenditure from corporate funds	Bastrop, TX 78602					
PURPOSE	(a) Category (See Categories listed at the top of this					
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.			
		Check if Austin	, TX, officeholder living expense			
Complete ONLV if direct	Candidate/Officeholder name	Office sought	Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Onice Sought	Onice neid			

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp y - Gift/Awards/Memorials Expense Printing Exp	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 2/5 Rpt: 8/12	Independent Texans PAC	00051624				
4 Date 01/07/2025	5 Payee name Best Buy					
6 Amount (\$)	7 Payee address; City; State; Zip Coc	e				
\$37.00	761 Hwy 71 W					
Expenditure from corporate funds	Bastrop, TX 78602					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense computer equipment repair				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held				
Date	Payee name					
03/10/2025	Campaign Verify					
Amount (\$) \$95.00	Payee address; City; State; Zip Coc 1214 31 St. NW	e				
Expenditure from corporate funds	Washington DC, DC 20007					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense texting registration license fee 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H	ht Office held				
Date 04/23/2025	Payee name Facebook					
		-				
Amount (\$) \$317.00	Payee address; City; State; Zip Coc 1 Hacker Way	e				
Expenditure from corporate funds	Menlo Park, CA 94025					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Boosted Posts 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H	ht Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling / - Gift/Awards/Memorials Expense Printing	epayment/Reinbursement Solicitation/Fundraising Expense tverhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 3/5 Rpt: 9/12	Independent Texans PAC	00051624				
4 Date	5 Payee name					
04/23/2025	Hopp, Dara					
6 Amount (\$)	7 Payee address; City; State; Zip C	Code				
\$575.00	PO Box 651					
Expenditure from corporate funds	Bastrop, TX 78602					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Video production				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	Dught Office held				
Date	Payee name					
03/17/2025	Jouwweb					
Amount (\$)	Payee address; City; State; Zip C	Code				
\$54.00	Torenallee 20 5617 BC Eindhoven					
Expenditure from corporate funds	Eindhoven Netherlands					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense unable to find a "zip" code				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held				
Date	Payee name					
04/16/2025	Sign & Banner					
Amount (\$)	Payee address; City; State; Zip C	Code				
\$162.00	1103 Main					
Expenditure from corporate funds	Bastrop, TX 78602					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs for Serna				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	Dught Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:						
Sch: 4/5 Rpt: 10/12	Independent Texans PAC 00051624					
4 Date	5 Payee name					
01/04/2025	The Texan					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$35.00	1011 San Jacinto Blvd Suite 315					
Expenditure from corporate funds	Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Legislative Luncheon 					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/19/2025	Vonage					
Amount (\$)	Payee address; City; State; Zip Code					
\$69.00	\$69.00 23 Main Street					
Expenditure from corporate funds	Holmdel, NJ 07733					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone service 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
01/23/2025	Walmart					
Amount (\$)	Payee address; City; State; Zip Code					
\$17.00	488 Hwy 71					
Expenditure from corporate funds	Bastrop, TX 78602					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office Supplies 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic: Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Exp y - Gift/Awards/Memorials Expense Printing E	Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 5/5 Rpt: 11/12	Independent Texans PAC	00051624				
4 Date	5 Payee name					
04/07/2025	Wix.com					
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode				
\$197.00	500 Terry Ave					
Expenditure from corporate funds	San Francisco, CA 94158					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
-		Check if Austin, TX, officeholder living expense				
		hosting renewal				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ught Office held				
Date	Payee name					
01/26/2025	Wix.com					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$64.00	500 Terry Ave					
Expenditure from corporate funds	San Francisco, CA 94158					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Email service				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	I Jight Office held				
expenditure to benefit C/O	n					
Date	Payee name					
02/25/2025	Wix.com					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$90.00	500 Terry Ave					
Expenditure from corporate funds	San Francisco, CA 94158					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Business email				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sou H	I Jight Office held				

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction Guide explains how to complete this form.					pages Schedule K: 1/1 Rpt: 12/12
2	2 FILER NAME					D (Ethics Commission Filers)
	Independent				0005	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	03/31/2025		American Express			\$197.00
		6	Address of person from whom amount is received; City; State; Zip Code 200 Vesey Street			
			New York, NY 10285			
		7	Purpose for which amount is received Check if p	olitio	cal con	tribution returned to filer
			rewards redemption			