	GENERAL- CAMPAIGN	COVER SHEET PG 1 2 Total pages filed: 10				
The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00089541						
3	COMMITTEE NAME			OFFICE USE ONLY		
	CP4T			Date Received ELECTRONICALLY FILED 04/25/2025		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE			
	ADDRESS	208 S. Harrison St		Date Hand-delivered or Date Postmarked		
		Amarillo, TX 79101		Receipt # Amount		
				Date Processed		
				Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST		MI		
	TREASURER NAME	Mr. David				
		NICKNAME LAST Bailey		SUFFIX		
6	CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 208 S. Harrison St				
	(Residence or Business)	Amarillo, TX 79101				
7	CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; PO Box 51752	APT / SUITE #; CITY;	; STATE; ZIP CODE		
		Amarillo, TX 79159				
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (972) 369-2655	R EXTENSION			
9	REPORT TYPE	January 15	30th day before election	Dissolution (Attach PAC-DR)		
		July 15	X 8th day before election Runoff	10th day after campaign treasurer termination		
10	PERIOD COVERED	Month Day Year 03/25/2025	Month Day THROUGH 04/23/2025	Year 5		
11	ELECTION	ELECTION DATE Month Day Year 05/03/2025	ELECTION TYPE X Primary Runoff General Special	Other		
			GO TO PAGE 2			

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8-DAY REPORT COPY PULLED FROM TEXAS ETHICS COMMISSION WEBSITE FORM GPAC GENERAL-PURPOSE COMMITTEE REPORT: **PURPOSE AND TOTALS COVER SHEET PG 2** 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) 00089541 CP4T 14 COMMITTEE 1. Candidates A. Supported **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) **15** CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR **TOTALS** \$ 0.00 CONTRIBUTIONS MADE ELECTRONICALLY) check here if this report qualifies for the higher itemization threshold 2. TOTAL POLITICAL CONTRIBUTIONS \$ 10,000.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ **TOTALS** 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 94,718.50 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 39.32 **BALANCE** OF THE REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE \$ LOAN TOTALS 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.

	Signature of Campaign Treasurer	
NOTARY STAMP / SEAL ABOVE		
bscribed before me, by the said	, this the	day
, 20, to certify which, witness my h	nand and seal of office.	

Mr. David Bailey

Signature of officer administering oath

Forms provided by Texas Ethics Commission

Sworn to and subscribed before me, by the said

AFFIX NOTARY STAMP / SEAL ABOVE

www.ethics.state.tx.us

Printed name of officer administering oath

Version V4.1.0.e02d6221

Title of officer administering oath

S	UBT	OTALS - GPAC		FORM GPAC
			C	OVER SHEET PG 3 3 of 10
	OMMITT P4T	EE NAME	18 Filer ID 00089541	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 10,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10	. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 94,718.50
11	. 🔲	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12	. 🔲	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13	. 🔲	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

8-DAY REPORT COPY PULLED FROM TEXAS ETHICS COMMISSION WEBSITE

CP4T 00089541 4 Date 5 Full name of contributor out-of-state PAC (ID#:		MONET	TARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
CP4T Date O4/08/2025 Full name of contributor Out-of-state PAC (ID#: O4/08/2025 Huffines, Donald \$10,000 \$10,		The Instru	iction Guide explains how to complete th	nis form.	
04/08/2025 Huffines, Donald \$10,000 6 Contributor address; City; State; Zip Code Dallas, TX 75225 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	2		<u> </u>		3 Filer ID (Ethics Commission Filers) 00089541
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	4		Huffines, Donald 6 Contributor address; City; State; Zip Code	(ID#:	7 Amount of Contribution (\$) \$10,000.
	8		1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 5/10	CP4T 00089541
4 Date	5 Payee name
04/01/2025	AT&T
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$976.50	208 S Akard St
Expenditure from	
corporate funds	Dallas, TX 75201
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Office Equipment
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
experience to benefit eye	
Date	Payee name
04/04/2025	Apple
Amount (\$)	Payee address; City; State; Zip Code
\$20.55	ONE APPLE PARK WAY
Expenditure from	
corporate funds	CUPERTINO, CA 95014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Software License
	Software Electise
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	Davies same
Date 04/13/2025	Payee name Apple
Amount (\$)	Payee address; City; State; Zip Code
\$15.14	ONE APPLE PARK WAY
Expenditure from	
corporate funds	CUPERTINO, CA 95014
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Software License
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

Advertising Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense 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

Candidate/Officeholder/Politica Credit Card Payment	ll Committee Legal Services Salaries/M The Instruction Guide explains how to co	/ages/Contract Labor OTHER (enter a category not listed above) mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/6 Rpt: 6/10	CP4T	00089541
4 Date	5 Payee name	
04/19/2025	Apple	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$2.98	ONE APPLE PARK WAY	
- Funanditura from		
Expenditure from corporate funds	CUPERTINO, CA 95014	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Software License
		Software Licerise
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	aht Office held
expenditure to benefit C/O		gnt Onice neid
Date	Davise name	
04/09/2025	Payee name Chevron	
		de.
Amount (\$)	Payee address; City; State; Zip Co	de
\$75.00	1480 Smith St	
Expenditure from		
corporate funds	Houston, TX 77002	
PURPOSE OF	,	(b) Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff Travel Fuel Costs
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	-1	
Date	Payee name	
03/27/2025	DealOn LLC	
Amount (\$)	Payee address; City; State; Zip Co	de
\$83,000.00	1800 S WASHINGTON ST	
,		
Expenditure from corporate funds	AMARILLO, TX 79102	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Refund	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	reciana	Check if Austin, TX, officeholder living expense
		Refund of Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held
experiorare to beliefft C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By -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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 7/10	CP4T 00089541
4	Date	5 Payee name
	04/08/2025	DealOn LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	1800 S WASHINGTON ST
	- Company distance from a	
	Expenditure from corporate funds	AMARILLO, TX 79102
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Refund Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	1	Refund of Contribution
	!	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	04/11/2025	EXXON
_	Amount (\$)	Payee address; City; State; Zip Code
	\$65.00	22777 SPRINGWOODS VILLAGE PKWY
	Ψ03.00	22777 SI KINOWOODS VIED GET KWT
	Expenditure from corporate funds	SPRING, TX 77389
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	1	Staff Travel Fuel Costs
	!	Gian Havori dei eeste
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	Н
_	Date	Payee name
	03/27/2025	FIRST BANK SOUTHWEST
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	2401 S GEORGIA ST
	420.00	2.010.025.10.101
	Expenditure from corporate funds	AMARILLO, TX 79109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	1	Check if Austin, TX, officeholder living expense Bank Fee
	1	Ballities
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 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)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 8/10	CP4T	00089541
4 Date	5 Payee name	•
03/31/2025	FIRST BANK SOUTHWEST	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$12.50	2401 S GEORGIA ST	
Expenditure from corporate funds	AMARILLO, TX 79109	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank Fee
		Bailer
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O		giit Cinec neiu
Data		
Date	Payee name	
04/16/2025	HEB	
Amount (\$)	Payee address; City; State; Zip Co	de
\$81.05	646 S FLORES ST	
Expenditure from		
corporate funds	SAN ANTONIO, TX 78204	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Travel Fuel Costs
		Stall Haverr del Costs
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		gnt Onice nelu
_		
Date	Payee name	
04/11/2025	RANDALLS	
Amount (\$)	Payee address; City; State; Zip Co	de
\$30.33	14610 Memorial Dr	
Expenditure from		
corporate funds	Houston, TX 77079	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Travel Fuel Costs
		Stail Havel Fuel Costs
Complete CNII V if direct	Condidate/Officeholder nema	oht Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	ght Office held

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 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)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/6 Rpt: 9/10	CP4T	00089541
4 Date	5 Payee name	•
04/14/2025	Sirius XM	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$9.57	1221 AVENUE OF THE AMERICAS	
Expenditure from		
corporate funds	NEW YORK, NY 19176	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense PAC Utility
		1 AC Cully
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/O		giil Cilioc noid
Date	Payee name	
04/08/2025	Sunoco	
Amount (\$)	Payee address; City; State; Zip Co	de
\$65.00	8111 Westchester Dr	

Expenditure from corporate funds	Dallas, TX 75225	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel III Bistrict	Check if Austin, TX, officeholder living expense
		PAC Staff Travel Meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experience to serious ever		
Date	Payee name	
04/12/2025	Support PDF Filler	
Amount (\$)	Payee address; City; State; Zip Co	de
\$153.50	17 STATION ST	
Expenditure from		
corporate funds	BROOKLINE, MA 02445	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Software License
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	4	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services The Instruction Guide explains I	Salaries/Wages/Contract Labor now to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers	 s)
Sch: 6/6 Rpt: 10/10	CP4T		00089541	
4 Date	5 Payee name			
04/10/2025	Teddy Jacks Armadillo			
6 Amount (\$)	7 Payee address; City; State;	Zip Code		
\$52.99	5080 COULTER ST S			
Expenditure from corporate funds	AMARILLO, TX 79119			
8 PURPOSE	(a) Category (See Categories listed at the top of this scho	(b) Description	1	
OF EXPENDITURE	Food/Beverage Expense		ravel outside of Texas. Complete Schedule T.	
			Austin, TX, officeholder living expense	
		Food and	Beverage for PAC Meeting	
9 Complete ONLY if direct	Candidate/Officeholder name C		Office held	
expenditure to benefit C/OI		3		
Date	Payee name			
04/10/2025	Toot'n Totum Food			
Amount (\$)	Payee address; City; State;	Zip Code		
\$70.00	1201 S TAYLOR ST			
Expenditure from				
corporate funds	AMARILLO, TX 79101			
PURPOSE	(a) Category (See Categories listed at the top of this scho			
OF EXPENDITURE	Travel In District	· · ·	ravel outside of Texas. Complete Schedule T.	
			oustin, TX, officeholder living expense	
		Stall Hav	err der Costs	
Complete ONLY if direct		Office sought	Office held	
expenditure to benefit C/OI	1			
Date	Payee name			
04/11/2025	Toot'n Totum Food			
Amount (\$)	Payee address; City; State;	Zip Code		
\$68.39	1201 S TAYLOR ST			
Expenditure from				
corporate funds	AMARILLO, TX 79101			
PURPOSE OF	(a) Category (See Categories listed at the top of this school			
EXPENDITURE	Travel In District		ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
		-	rel Fuel Costs	
		Stan Hav	5 doi 005t5	
Complete ONLY if direct		I Office sought	Office held	
expenditure to benefit C/OI	1			