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:

OFFICE USE ONLY

Date Received

RECEIVED
APR 2 1 2025
By SCR

Date Hand-delivered or Date Postmarked: 4-21-25

Receipt # | Amount $

Date Processed 4-22-25

Date Imaged

3 COMMITTEE NAME

LTISD DOGE PAC

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX: [redacted] APT / SUITE #: CITY: STATE: ZIP CODE

Spicewood, TX 78669

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: Jennifer MI:

NICKNAME: LAST: Fleck SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): Same as above APT / SUITE #: CITY: STATE: ZIP CODE

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET ADDRESS OR PO BOX: Same as above APT / SUITE #: CITY: STATE: ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER [redacted] EXTENSION

9 REPORT TYPE

☐ January 15
☐ July 15
☐ 30th day before election
☒ 8th day before election
☐ Runoff
☐ Exceeded Modified Reporting Limit
☐ Dissolution Report (Attached PAC-FR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 4/4/25 THROUGH Month Day Year: 4/21/25

11 ELECTION

ELECTION DATE: Month Day Year: 5/3/25

ELECTION TYPE:
☐ Primary ☐ Runoff ☒ Other
☐ General ☐ Special
Description: Local

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME: LTISD DOGE PAC

13 Filer ID (Ethics Commission Filers):

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)

- ☐ SUPPORT (Candidate or Measure)
- ☐ OPPOSE (Candidate or Measure)
- ☐ ASSIST (Officeholder)

- ☒ CANDIDATE
- ☐ OFFICEHOLDER
- ☐ MEASURE

CANDIDATE / OFFICEHOLDER NAME: Archer Bowe Woodcock

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder): Trustee

BALLOT IDENTIFICATION # (if): LTISD

ELECTION DATE (Month, Day, Year): 5/3/25

DESCRIPTION:

15 CONTRIBUTION TOTALS			
	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1,693.73
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 1,693.73
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

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.

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 _____, 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

OR

(2) Unsworn Declaration

My name is Jennifer Fleck, and my date of birth is [redacted]

My address is [redacted] (street), Spicewood (city), TX (state), 78669 (zip code) (country)

Executed in Travis County, State of TX, on the 21st day of April (month), 2025 (year)

Signature of Campaign Treasurer (Declarant)

SUBTOTALS - SPAC

FORM SPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
LTISD PDGE PAC	

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 1,693.73
2.	[ ]	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	[ ]	SCHEDULE C1 : MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5.	[ ]	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6.	[ ]	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	$
7.	[ ]	SCHEDULE E: LOANS	$ 1,693.73
8.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
9.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
10.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
11.	[ ]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
12.	[ ]	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
13.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
14.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

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: 1

2 FILER NAME: LTISD DOGE PAC

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
	We the People Lake Travis	1,693.73
	6 Contributor address: [redacted] City: Spicewood State: TX Zip Code:	

8 Principal occupation / Job title (See Instructions)	9 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)

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.

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
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.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
1	LTSD DOGE PAC	

4 Date	5 Payee name			
4/21/25	Stokes			
6 Amount ($)	**7 Payee address:**	**City:**	**State:**	**Zip Code**
1693.73	1909 RR 4205	Austin	TX	78734

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule):

(b) Description:

(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: — Payee name:

Amount ($): — Payee address: — City: — State: — Zip Code:

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): — Description:

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: — Payee name:

Amount ($): — Payee address: — City: — State: — Zip Code:

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): — Description:

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

AFFIDAVIT FOR COMMITTEE: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a campaign treasurer of a political committee that has accepted more than $33,910 in political contributions or made more than $33,910 in political expenditures in any calendar year must file all subsequent reports electronically.

OFFICE USE ONLY	
Date Received	RECEIVED APR 2 1 2025 By
Date Hand-delivered or Date Postmarked	4-21-25
Receipt #	Amount $
Date Processed	4-22-25
Date Imaged	

Filer name	Filer ID #

1. I swear or affirm that the political committee of which I am the campaign treasurer has not accepted more than $33,910 in political contributions or made more than $33,910 in political expenditures in a calendar year.
2. I further swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
3. I further swear or affirm that no person acting as the committee's agent or consultant, and no person with whom the committee contracts, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
4. I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts exceeds $33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
5. I am filing this affidavit with the 8 day report due on 4/25/25. I understand that this affidavit is required to be filed with each campaign finance report for which the committee is claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

_____
Signature of Campaign Treasurer

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is Jennifer Flock and my date of birth is [redacted]

My address is [redacted] (street) Sanctuary (city) TX (state) 78654 (zip code) (country)

Executed in Travis County, State of TX, on the 21 day of April (month), 2025 (year).

_____
Signature of Campaign Treasurer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER