

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: <div style="text-align: center; font-size: 24pt; font-weight: bold;">11</div>									
3 COMMITTEE NAME <div style="text-align: center; font-size: 18pt;">Just Zoo It</div>		OFFICE USE ONLY										
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6445 Abilene, Texas 79608		Date Received <div style="border: 1px solid blue; padding: 5px; text-align: center;"> Abilene City Secretary OCT 30 2023 Filed for Record </div> Date Hand-delivered or Date Postmarked									
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. David Hernandez	Receipt # Amount \$	Date Processed									
	NICKNAME LAST SUFFIX	Date Imaged										
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3900 N 1st St. Ste #2 Abilene, Texas 79603											
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3900 N 1st St. Ste. #2 Abilene, Texas 79603											
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 673-4521											
9 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Dissolution Report (Attached PAC-FR)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 10th day after campaign treasurer termination</td> </tr> </table>			<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 checked="" 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
<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 checked="" 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	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month Day Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month Day Year</td> </tr> <tr> <td style="text-align: center; font-size: 24pt;">09 / 29 / 2023</td> <td></td> <td style="text-align: center; font-size: 24pt;">10 / 28 / 2023</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	09 / 29 / 2023		10 / 28 / 2023			
Month Day Year	THROUGH	Month Day Year										
09 / 29 / 2023		10 / 28 / 2023										
11 ELECTION	ELECTION DATE Month Day Year 11 / 07 / 2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special Description <u> bond </u>										

GO TO PAGE 2

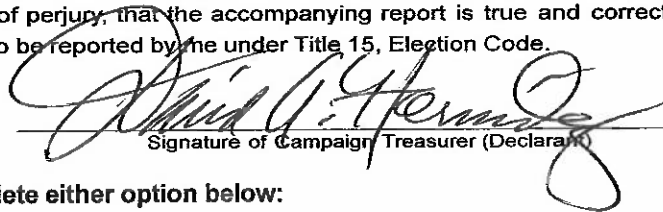
SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME Just Zoo It		13 Filer ID (Ethics Commission Filers)		
14 COMMITTEE PURPOSE (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 type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER <input checked="" type="checkbox"/> MEASURE	CANDIDATE / OFFICEHOLDER NAME OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <table style="width:100%; border: none;"> <tr> <td style="width:60%;">BALLOT IDENTIFICATION / # Prop A</td> <td style="width:40%; text-align: right;">ELECTION DATE Month Day Year 11 / 07 / 2023</td> </tr> </table> DESCRIPTION Abilene Zoo bond	BALLOT IDENTIFICATION / # Prop A	ELECTION DATE Month Day Year 11 / 07 / 2023
	BALLOT IDENTIFICATION / # Prop A	ELECTION DATE Month Day Year 11 / 07 / 2023		

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)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

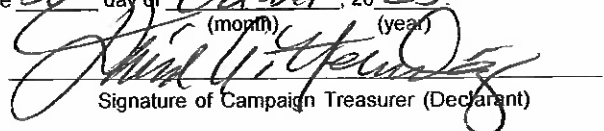
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
OR		

(2) Unsworn Declaration

My name is David A. Hernandez, and my date of birth is March 20, 1969.

My address is 209 Winchester St. Tuscola TX 79562
(street) (city) (state) (zip code)(country)

Executed in Taylor County, State of TX, on the 30th day of October, 2023.
(month) (year)


 Signature of Campaign Treasurer (Declarant)

SUBTOTALS - SPAC

**FORM SPAC
COVER SHEET PG 3**

17 COMMITTEE NAME Just Zoo It		18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,490
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,210
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> 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: 7
2 FILER NAME Just Zoo It		3 Filer ID (Ethics Commission Filers)
4 Date 10/24/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert & Clairissa Tucker	7 Amount of contribution (\$) \$ 100
6 Contributor address; City; State; Zip Code 3350 Silver Oaks Abilene Tx 79606		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/24/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph McCleskey	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 19 Kings East Cross Abilene Tx 79602		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Just Zoo It		3 Filer ID (Ethics Commission Filers)
4 Date 10/10/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Kiel	7 Amount of contribution (\$) \$ 100
6 Contributor address; City; State; Zip Code 533 Sayles Blvd Abilene Tx 79605		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angie Wiley	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 3442 S. 10th Abilene Tx 79605		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick Lewis	Amount of contribution (\$) \$ 150
Contributor address; City; State; Zip Code 2002 Cedar Crest Abilene Tx 79601		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Tucker	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 3350 Silver Oaks Abilene Tx 79606		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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:
2 FILER NAME Just Zoo It		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. Mrs. Joe Canon	7 Amount of contribution (\$) \$500
6 Contributor address; City; State; Zip Code 102 Tiguewood Cir Abilene Tx 79605		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/3/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. Jeff Goodin	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 14 Augusta Abilene Tx 79606		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/5/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam & Shellie Evans	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 100 Castle Dr Abilene Tx 79602		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/5/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay & David Watson	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 2134 Robin Rd Abilene Tx 79605		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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:
2 FILER NAME <i>Just Zoo It</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/2/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mr & Mrs Murphy Rhoads</i>	7 Amount of contribution (\$) <i>\$ 100</i>
6 Contributor address; City; State; Zip Code <i>633 Washington Blvd Abilene Tx 79601</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>10/2/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carolyn Dyous</i>	Amount of contribution (\$) <i>\$ 100</i>
Contributor address; City; State; Zip Code <i>3134 S 19th Abilene Tx 79605</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>10/3/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>m/m Larry Gill</i>	Amount of contribution (\$) <i>\$ 250</i>
Contributor address; City; State; Zip Code <i>1204 Wylie Way Abilene Tx 79602</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>10/3/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nancy Lynn Wilkinson</i>	Amount of contribution (\$) <i>\$</i>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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:
2 FILER NAME Just 200 It		3 Filer ID (Ethics Commission Filers)
4 Date 10/2/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George & Sidney Wevesque	7 Amount of contribution (\$) \$ 100
6 Contributor address; City; State; Zip Code 4417 Margaritas Way Abilene Tx 79606		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue McWilliams	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code 1474 Woodland Tr Abilene Tx 79605		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Hennig	Amount of contribution (\$) \$ 200
Contributor address; City; State; Zip Code 4701 Stonehedge Abilene Tx 79606		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnny Bliznals	Amount of contribution (\$) \$ 500
Contributor address; City; State; Zip Code 34 Winged Foot Abilene Tx 79606		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Just 200 It		3 Filer ID (Ethics Commission Filers)
4 Date 10/2/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr & Mrs Jud Powell	7 Amount of contribution (\$) \$250
6 Contributor address; City; State; Zip Code 20 Hoyalake Dr Abilene Tx 79606		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chuck Erwin	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code PO Box 328 Abilene Tx 79604		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melody Hunt	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 1950 Benz Dr Abilene Tx 79602		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/2/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynn Roeder	Amount of contribution (\$) \$150
Contributor address; City; State; Zip Code 1420 Tanglewood Abilene Tx 79605		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 7
2 FILER NAME <i>Just Zoo It</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/2/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Darrel Knight</i>	7 Amount of contribution (\$) <i>\$100</i>
6 Contributor address; City; State; Zip Code <i>717 Pollard Abilene Tx 79602</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>10/2/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Miller & Diana Riebert</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>15 Glen Abbey Abilene Tx 79606</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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.

1 Total pages Schedule F1:	2 FILER NAME Just Zoo It	3 Filer ID (Ethics Commission Filers)
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4 Date 10/12/23	5 Payee name 3rd Street Printing
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6 Amount (\$) \$5,359.40	7 Payee address; 1230 W. 3rd	City; Abilene	State; Tx	Zip Code 79601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description letters, signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/16/23	Payee name kamar Advertising
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Amount (\$) \$2,832.44	Payee address; 4282 Treanor Dr	City; Abilene	State; Tx	Zip Code 79602
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Billboards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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