

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) 00082985	2 Total pages filed: 308
3 COMMITTEE NAME Cambio Texas PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado, STE 62 Edinburg, TX 78539		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Parthkumar	MI	
	NICKNAME LAST SUFFIX Naik		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado, STE 62 Edinburg, TX 78539		
	7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		
		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4108 Nightshade Ave. McAllen, TX 78504	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 330-7552		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023		
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Cambio Texas PAC	13 Filer ID (Ethics Commission Filers) 00082985
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	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
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 1.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 23,448.82
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 20,543.60
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,723.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 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.

Mr. Parthkumar Naik

Signature of Campaign Treasurer

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Cambio Texas PAC		18 Filer ID (Ethics Commission Filers) 00082985
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,448.82
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 C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 20,543.60
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/267 Rpt: 4/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abarca, Onofre Antonio <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94601	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abarca, Onofre Antonio <hr/> Contributor address; City; State; Zip Code Oakland, CA 94601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abarca, Onofre Antonio <hr/> Contributor address; City; State; Zip Code Oakland, CA 94601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abarca, Onofre Antonio <hr/> Contributor address; City; State; Zip Code Oakland, CA 94601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abel, Prado <hr/> Contributor address; City; State; Zip Code Donna, TX 78537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/267 Rpt: 5/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abma, Katie <hr/> 6 Contributor address; City; State; Zip Code Westmont, TX 60559	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Environmental Health & Safety		9 Employer (See Instructions) DePaul University
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Addis, Elizabeth <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98682	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Addis, Elizabeth <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98682	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aderhold, Bob <hr/> Contributor address; City; State; Zip Code Edina, MN 55410	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adobe <hr/> Contributor address; City; State; Zip Code Baltimore, TX	Amount of Contribution (\$) \$11.89
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/267 Rpt: 6/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara <hr/> 6 Contributor address; City; State; Zip Code Tulsa, OK 74105	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Cvent
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74105	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74105	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Julie <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Cisco Systems
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albu, Emily <hr/> Contributor address; City; State; Zip Code Davis, CA 95618	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Classics professor emerita		Employer (See Instructions) University of California

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/267 Rpt: 7/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David <hr/> 6 Contributor address; City; State; Zip Code Davis, CA 95618	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David <hr/> Contributor address; City; State; Zip Code Davis, CA 95618	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/267 Rpt: 8/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin 6 Contributor address; City; State; Zip Code Milton, MA 02186	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) University of Massachusetts
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin Contributor address; City; State; Zip Code Milton, MA 02186	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amdur, David Contributor address; City; State; Zip Code St. Paul, MN 55105	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia Contributor address; City; State; Zip Code Bridgewater, NJ 08807	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia Contributor address; City; State; Zip Code Bridgewater, NJ 08807	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/267 Rpt: 9/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia	7 Amount of Contribution (\$) \$1.43
6 Contributor address; City; State; Zip Code Bridgewater, NJ 08807		
8 Principal occupation / Job title (See Instructions) Proposal Manager		9 Employer (See Instructions) Cigna
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Elizabeth	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Los Angeles, CA 90057		
Principal occupation / Job title (See Instructions) Muscian		Employer (See Instructions) First Congregational Church of Los Angeles
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric	Amount of Contribution (\$) \$2.78
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/267 Rpt: 10/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Linda <hr/> Contributor address; City; State; Zip Code Henderson, NV 89053	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevada Attorney General
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andon, Anabelle <hr/> Contributor address; City; State; Zip Code Ridgewood, NJ 07450-5028	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MELS		Employer (See Instructions) Columbia University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/267 Rpt: 11/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andree Wiltens, Matt <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90046	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andree Wiltens, Matt <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andree Wiltens, Matt <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angle, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Ernst & Young
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Argenziano, Frank <hr/> Contributor address; City; State; Zip Code Dumfries, VA 22026	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Contract specialist		Employer (See Instructions) DOD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/267 Rpt: 12/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94104	7 Amount of Contribution (\$) \$3.88
8 Principal occupation / Job title (See Instructions) accountant		9 Employer (See Instructions) Tarlson & Associates
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94104	Amount of Contribution (\$) \$3.88
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aromin, Christian <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32225	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) developer		Employer (See Instructions) accenture
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aronoff, Carol <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur, Mary <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28269	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/267 Rpt: 13/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur, Mary <hr/> 6 Contributor address; City; State; Zip Code Charlotte, NC 28269	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Artman, Amy <hr/> Contributor address; City; State; Zip Code Harriso, AR 72601	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Missouri Syate University
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arvidson, Kristin <hr/> Contributor address; City; State; Zip Code Seattle, TX 98146	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Wiley's Water Sports
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auzenne, Murvin <hr/> Contributor address; City; State; Zip Code Houston, TX 77043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Strake Jesuit College Preparatory
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Eric <hr/> Contributor address; City; State; Zip Code Washington, DC 20010	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Community Manager		Employer (See Instructions) Crooked Media

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/267 Rpt: 14/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bajuniemi, Abby <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55108	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) UX Research and Design		9 Employer (See Instructions) CH Robinson
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Robert <hr/> Contributor address; City; State; Zip Code Manhasset, NY 11030	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Russell <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55419	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Calabrio
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, David <hr/> Contributor address; City; State; Zip Code Oakland, CA 94610	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) designer		Employer (See Instructions) Jacob May
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, David <hr/> Contributor address; City; State; Zip Code Oakland, CA 94610	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) designer		Employer (See Instructions) Jacob May

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/267 Rpt: 15/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, David	7 Amount of Contribution (\$) \$1.25
6 Contributor address; City; State; Zip Code Oakland, CA 94610		
8 Principal occupation / Job title (See Instructions) designer		9 Employer (See Instructions) Jacob May
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair	Amount of Contribution (\$) \$2.78
Contributor address; City; State; Zip Code Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair	Amount of Contribution (\$) \$2.78
Contributor address; City; State; Zip Code Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code livingstgon, NJ 07039		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code livingstgon, NJ 07039		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/267 Rpt: 16/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric <hr/> 6 Contributor address; City; State; Zip Code livingstgon, NJ 07039	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Federal Govt
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barba, Cesar <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Venice Family Clinic
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnitz, Joy <hr/> Contributor address; City; State; Zip Code Fremont, CA 94539	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barth, Anita <hr/> Contributor address; City; State; Zip Code Torrance, CA 90503	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartoloni, Ann <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/267 Rpt: 17/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.04
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Self
Date 02/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/267 Rpt: 18/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.04
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/267 Rpt: 19/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> 6 Contributor address; City; State; Zip Code GREER, SC 29651-9029	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code GREER, SC 29651-9029	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code GREER, SC 29651-9029	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code GREER, SC 29651-9029	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code GREER, SC 29651-9029	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/267 Rpt: 20/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> 6 Contributor address; City; State; Zip Code GREER, SC 29651-9029	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code GREER, SC 29651-9029	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Joseph <hr/> Contributor address; City; State; Zip Code BRIDGEWATER, NJ 08807	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becko, Katy <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74145	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Administrative Coordinator		Employer (See Instructions) Center for Religion and Psychotherapy of Chicago
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeson, Jennifer <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Federal government

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/267 Rpt: 21/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behrens, Rebecca <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10028	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Self
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belanger, Maurice <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$5.71
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellon, Elizabeth <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98005	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Christopher <hr/> Contributor address; City; State; Zip Code Portland, OR 97215	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Christopher <hr/> Contributor address; City; State; Zip Code Portland, OR 97215	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/267 Rpt: 22/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Christopher <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97215	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Providence Health and Services
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bensen, Matt <hr/> Contributor address; City; State; Zip Code Durham, CT 27713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) RTI International
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bensoua, Aaron <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92626	Amount of Contribution (\$) \$1.35
Principal occupation / Job title (See Instructions) Marketing/PR		Employer (See Instructions) Finn Partners
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkson, Marsha <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Public Health Nutrition		Employer (See Instructions) Illinois Public Health Institute

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/267 Rpt: 23/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60610	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Public Health Nutrition		9 Employer (See Instructions) Illinois Public Health Institute
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berol, Laura <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22046	Amount of Contribution (\$) \$285.71
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berol, Laura <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22046	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertschmann, Samantha <hr/> Contributor address; City; State; Zip Code Boston, MA 02113	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Production Coordinator		Employer (See Instructions) Houghton Mifflin Harcourt
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Steve <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Computer Systems Engineer		Employer (See Instructions) Industrial Light + Magic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/267 Rpt: 24/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78210		
8 Principal occupation / Job title (See Instructions) Software developer		9 Employer (See Instructions) Wolfram Research
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bieganski, Nicole	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Dentons
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biller, Arthur	Amount of Contribution (\$) \$2.86
Contributor address; City; State; Zip Code Denver, CO 80212		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Colorado Department of Law
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bissell, Kathleen	Amount of Contribution (\$) \$7.14
Contributor address; City; State; Zip Code Pacifica, CA 94044		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bjornstad, Jennifer	Amount of Contribution (\$) \$14.29
Contributor address; City; State; Zip Code Carlsbad, CA 92009		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Pacific Ridge School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/267 Rpt: 25/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanar, David <hr/> 6 Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-7900	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Google
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Christy <hr/> Contributor address; City; State; Zip Code BARRINGTON, RI 02806	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Comms		Employer (See Instructions) NMF
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blitz, Roberta <hr/> Contributor address; City; State; Zip Code Livingston, NJ 07039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/267 Rpt: 26/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloom, Ellen <hr/> 6 Contributor address; City; State; Zip Code Fridley, MN 55432	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Study Director		9 Employer (See Instructions) NAMSA
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloom, Ellen <hr/> Contributor address; City; State; Zip Code Fridley, MN 55432	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Study Director		Employer (See Instructions) NAMSA
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloom, Ellen <hr/> Contributor address; City; State; Zip Code Fridley, MN 55432	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Study Director		Employer (See Instructions) NAMSA
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowdish, Josh <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85260	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) SVB
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowdish, Josh <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) SVB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/267 Rpt: 27/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Kelly <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Speech language pathologist		9 Employer (See Instructions) NYU Hospitals
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Deeann <hr/> Contributor address; City; State; Zip Code Hemet, CA 92544-4020	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Photojournalist		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Mallory <hr/> Contributor address; City; State; Zip Code Overland Park, KS 66207	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Omnicell
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Mallory <hr/> Contributor address; City; State; Zip Code Overland Park, KS 66207	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Omnicell
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Mallory <hr/> Contributor address; City; State; Zip Code Overland Park, KS 66207	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Omnicell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/267 Rpt: 28/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Bloomfield, NJ 07003	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) administrative		9 Employer (See Instructions) manhattan theatre club
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jennifer <hr/> Contributor address; City; State; Zip Code Bloomfield, NJ 07003	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) manhattan theatre club
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/267 Rpt: 29/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brieske, Ali <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Academic Personnel		9 Employer (See Instructions) UCSB
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brill, Jessie <hr/> Contributor address; City; State; Zip Code Syracuse, NY 13215	Amount of Contribution (\$) \$2.88
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Karen <hr/> Contributor address; City; State; Zip Code Portland, OR 97210	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Food critic		Employer (See Instructions) Portland Monthly
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browall, Victoria <hr/> Contributor address; City; State; Zip Code Merrimac, MA 01860	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) Market Street Talent
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Carolyn <hr/> Contributor address; City; State; Zip Code Antelope, CA 95843	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/267 Rpt: 30/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Judith <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11216	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Kristen <hr/> Contributor address; City; State; Zip Code KENNESAW, GA 30152	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) O'Reilly Media Inc.
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Margaret <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85024	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Moss Adams
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Melissa <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28270	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Helen Adams Realty
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Ryan <hr/> Contributor address; City; State; Zip Code RENO, NV 89510	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/267 Rpt: 31/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code White Settlement, TX 76108		
8 Principal occupation / Job title (See Instructions) Material Handler		9 Employer (See Instructions) Ryder
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code White Settlement, TX 76108		
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code White Settlement, TX 76108		
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burbank, Gregory	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Bountiful, UT 84010		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Davis County
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdick, William	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Savannah, GA 31411		
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/267 Rpt: 32/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdick, William <hr/> 6 Contributor address; City; State; Zip Code Savannah, GA 31411	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Principal Software Application Engineer		9 Employer (See Instructions) Workday
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdick, William <hr/> Contributor address; City; State; Zip Code Savannah, GA 31411	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/267 Rpt: 33/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Alexander <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20910	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Media Specialist		9 Employer (See Instructions) Cystic Fibrosis Foundation
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burroughs, Jennifer <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) nurse practitioner		Employer (See Instructions) Kaiser Permanente
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily <hr/> Contributor address; City; State; Zip Code Nashville, TN 37206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily <hr/> Contributor address; City; State; Zip Code Nashville, TN 37206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily <hr/> Contributor address; City; State; Zip Code Nashville, TN 37206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/267 Rpt: 34/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buss, Tony <hr/> 6 Contributor address; City; State; Zip Code Apple Creek, OH 44606	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butts, Arielle <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) University of Tennessee

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/267 Rpt: 35/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butts, Arielle <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77346	7 Amount of Contribution (\$) \$8.34
8 Principal occupation / Job title (See Instructions) Researcher		9 Employer (See Instructions) University of Tennessee
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byram, Rebecca <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30324	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Research Coordinator		Employer (See Instructions) Emory University
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/267 Rpt: 36/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTENSEN, KAREN <hr/> 6 Contributor address; City; State; Zip Code Argyle, NY 12809	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) farmer		9 Employer (See Instructions) self
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULP, MEREDITH <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Keurig Dr Pepper
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadwallader, Judith <hr/> Contributor address; City; State; Zip Code CENTENNIAL, CO 80122	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) director		Employer (See Instructions) western union
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camfield, Kevin <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Carlynn <hr/> Contributor address; City; State; Zip Code Gresham, OR 97080	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/267 Rpt: 37/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Neal <hr/> 6 Contributor address; City; State; Zip Code Upper Black Eddy, PA 18972	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Self employed		9 Employer (See Instructions) Bucks Digital
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carswell, Donna <hr/> Contributor address; City; State; Zip Code Huntingdon Valley, PA 19006	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carswell, Donna <hr/> Contributor address; City; State; Zip Code Huntingdon Valley, PA 19006	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carswell, Donna <hr/> Contributor address; City; State; Zip Code Huntingdon Valley, PA 19006	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Alex <hr/> Contributor address; City; State; Zip Code Lee's Summit, MO 64086	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Apple

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/267 Rpt: 38/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Alex <hr/> 6 Contributor address; City; State; Zip Code Lee's Summit, MO 64086	7 Amount of Contribution (\$) \$8.34
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Apple
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cashman, Josephine <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassady, Janet <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Eduardo <hr/> Contributor address; City; State; Zip Code Jackson Heights, NY 11372	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/267 Rpt: 39/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> 6 Contributor address; City; State; Zip Code Fair Oaks, CA 95628	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Civil servant		9 Employer (See Instructions) Franchise Tax Board
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/267 Rpt: 40/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Evan <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98118-2180	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Twitter Inc.
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Andrew <hr/> Contributor address; City; State; Zip Code Roanoke, VA 24015	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Bartender		Employer (See Instructions) Carrabba's Italian Grill
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Ellis <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase Jr, Theodore <hr/> Contributor address; City; State; Zip Code Princeton, NJ 08540	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase Jr, Theodore <hr/> Contributor address; City; State; Zip Code Princeton, NJ 08540	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/267 Rpt: 41/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase Jr, Theodore <hr/> 6 Contributor address; City; State; Zip Code Princeton, NJ 08540	7 Amount of Contribution (\$) \$33.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Nathan <hr/> Contributor address; City; State; Zip Code San Mateo, CA 94403	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Relypsa
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chernos, Alexandra <hr/> Contributor address; City; State; Zip Code Denver, CO 80204	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christensen, Anthony <hr/> Contributor address; City; State; Zip Code Lyndhurst, OH 44124	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Senior Software Engineer		Employer (See Instructions) MIM Software Inc.
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code Holladay, UT 84124	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/267 Rpt: 42/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa <hr/> 6 Contributor address; City; State; Zip Code Holladay, UT 84124	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code Holladay, UT 84124	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Cherise <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28217	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Associate Director of Advancement		Employer (See Instructions) Children's Theatre of Charlotte
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Geoffrey <hr/> Contributor address; City; State; Zip Code Foster City, CA 94404	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Guidewire Software
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-5144	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/267 Rpt: 43/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98102-5144	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Researcher		9 Employer (See Instructions) Amazon
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Dorothy <hr/> Contributor address; City; State; Zip Code Bullhead City, AZ 86429	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/267 Rpt: 44/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Rosemary <hr/> 6 Contributor address; City; State; Zip Code Golden, CO 80401	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Rosemary <hr/> Contributor address; City; State; Zip Code Golden, CO 80401	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Rosemary <hr/> Contributor address; City; State; Zip Code Golden, CO 80401	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofrin, David <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30306	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Eileen <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94702	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/267 Rpt: 45/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collica, Sarah <hr/> 6 Contributor address; City; State; Zip Code Northridge, CA 91343	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) administrative		9 Employer (See Instructions) shalom institute
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collica, Sarah <hr/> Contributor address; City; State; Zip Code Northridge, CA 91343	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collica, Sarah <hr/> Contributor address; City; State; Zip Code Northridge, CA 91343	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colton, Carla <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90025	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler <hr/> Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/267 Rpt: 46/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler	7 Amount of Contribution (\$) \$3.12
6 Contributor address; City; State; Zip Code Oakland, CA 94618		
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Urban Machine
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conahan, Teresa	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Encinitas, CA 92024		
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connery, Matt	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Boulder, CO 80302		
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Self
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/267 Rpt: 47/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 02/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) researcher		9 Employer (See Instructions) Self
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/267 Rpt: 48/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Lauren <hr/> 6 Contributor address; City; State; Zip Code Columbia, SC 29204	7 Amount of Contribution (\$) \$7.14
8 Principal occupation / Job title (See Instructions) Account Manager		9 Employer (See Instructions) Cyberwoven
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppola, Lauren <hr/> Contributor address; City; State; Zip Code Burlington, MA 01803	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Audley Travel
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbett, Meagan <hr/> Contributor address; City; State; Zip Code Albany, NY 12210	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Program Assistant		Employer (See Instructions) NYS Education Department
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cormier, Sandy <hr/> Contributor address; City; State; Zip Code Wareham, MA 02571	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) customer analyst		Employer (See Instructions) EMD Serono
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code Columbus, OH 43215	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/267 Rpt: 49/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43215	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Software Engineering		9 Employer (See Instructions) Fusion Alliance
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/267 Rpt: 50/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code San Marcos, TX 78666		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousineau Kiley, Mary	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Belmont, MA 02478-4410		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Staples
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Pam	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Raleigh, NC 27607		
Principal occupation / Job title (See Instructions) account manager		Employer (See Instructions) zig zibit
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Chris	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code PETALUMA, CA 94954		
Principal occupation / Job title (See Instructions) Game Designer		Employer (See Instructions) Epic Games Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/267 Rpt: 51/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crespo, Richard <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20017	7 Amount of Contribution (\$) \$3.89
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) DOJ
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crilly, chelsea <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024	Amount of Contribution (\$) \$2.77
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crisman, Linda <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89135	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Jackson Family Wines
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryan, Melissa <hr/> Contributor address; City; State; Zip Code Andover, MA 01810	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) grant manager		Employer (See Instructions) Commonwealth of MA
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currie, Lauren <hr/> Contributor address; City; State; Zip Code Somerville, MA 02144	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Nonprofit Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/267 Rpt: 52/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curts, Rosemary <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75211	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) public school teacher		9 Employer (See Instructions) Dallas ISD
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Olivia <hr/> Contributor address; City; State; Zip Code Portland, TX 97217	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Customer success		Employer (See Instructions) Epiq
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Czeisel, Marianna <hr/> Contributor address; City; State; Zip Code East Rockaway, NY 11518	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Library Assistant		Employer (See Instructions) CUNY Baruch College
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Agrosa, Anna <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11237	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) HR project manager		Employer (See Instructions) NYC ACS
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANTE, Morris <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/267 Rpt: 53/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daschle, Edward <hr/> 6 Contributor address; City; State; Zip Code College Park, MD 20740	7 Amount of Contribution (\$) \$5.56
8 Principal occupation / Job title (See Instructions) GTA		9 Employer (See Instructions) UMD
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave, Kushal <hr/> Contributor address; City; State; Zip Code Portland, OR 97212	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Director of Engineering		Employer (See Instructions) Twitter
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Jennifer <hr/> Contributor address; City; State; Zip Code Stillwater, MN 55082	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Member Services		Employer (See Instructions) Girl Scouts River Valleys
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davids, Jennifer <hr/> Contributor address; City; State; Zip Code Springfield, IL 62702	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Scientific Affairs		Employer (See Instructions) Silicon Biosystems
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/267 Rpt: 54/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Aerospace manager		9 Employer (See Instructions) Northrop Grumman
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/267 Rpt: 55/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac	7 Amount of Contribution (\$) \$3.12
6 Contributor address; City; State; Zip Code Woodlawn, TN 37191		
8 Principal occupation / Job title (See Instructions) Graduate Student		9 Employer (See Instructions) University of Cape Town South Africa
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Woodlawn, TN 37191		
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jim	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78703		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Michale	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Dacula, GA 30019		
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) VCA
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Sandy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code El Cerrito, CA 94530		
Principal occupation / Job title (See Instructions) graphic designer		Employer (See Instructions) freelance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/267 Rpt: 56/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Rodriguez, Gloria <hr/> 6 Contributor address; City; State; Zip Code Guttenberg, NJ 07093	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSanti, Susan <hr/> Contributor address; City; State; Zip Code Walnut Creek, CA 94598	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSanti, Susan <hr/> Contributor address; City; State; Zip Code Walnut Creek, CA 94598	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) therapist		Employer (See Instructions) self
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Kurt <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02482	Amount of Contribution (\$) \$35.71
Principal occupation / Job title (See Instructions) Cloud Engineer		Employer (See Instructions) HDAI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/267 Rpt: 57/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Kurt	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Wellesley, MA 02482		
8 Principal occupation / Job title (See Instructions) Cloud Engineer		9 Employer (See Instructions) HDAI
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaby, Tricia	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code Carmel, IN 46033		
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Fishers Y
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/267 Rpt: 58/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delcomyn, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Bloomington, IN 47404	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Postal Carrier		9 Employer (See Instructions) USPS
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depin, Kelly <hr/> Contributor address; City; State; Zip Code West Barnstable, MA 02668	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Derby Academy
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrer, Megan <hr/> Contributor address; City; State; Zip Code Collierville, TN 38017	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UW Hospitals and Clinics
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshmukh, Sunita <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90027	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) data governance		Employer (See Instructions) Epic Games
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewater, Joey <hr/> Contributor address; City; State; Zip Code Kihei, HI 96753	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Public Health		Employer (See Instructions) RCUH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/267 Rpt: 59/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dharani, Ambreen	7 Amount of Contribution (\$) \$3.13
6 Contributor address; City; State; Zip Code Round Rock, TX 78665		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Zwicker & Associates
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiGiovanni, Mark	Amount of Contribution (\$) \$14.29
Contributor address; City; State; Zip Code Somerset, NJ 08873		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ranney School
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Bonnie	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Winters, CA 95694		
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) UC Davis
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code New York, NY 10150		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code New York, NY 10150		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/267 Rpt: 60/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> 6 Contributor address; City; State; Zip Code Walnut, CA 91789	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) SCPMG
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> Contributor address; City; State; Zip Code Walnut, CA 91789	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> Contributor address; City; State; Zip Code Walnut, CA 91789	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code burbank, CA 91505	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code burbank, CA 91505	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/267 Rpt: 61/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowd, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60613	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Data Analyst		9 Employer (See Instructions) Collegis Education
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DuCharme, Christy <hr/> Contributor address; City; State; Zip Code Cottonwood, AZ 86326	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/267 Rpt: 62/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Billerica, MA 01821		
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) Genuine Interactive
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Billerica, MA 01821		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 01/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/267 Rpt: 63/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Austin, TX 78727	
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Tangoe Inc
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78727	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78727	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Hollywood, FL 33019	
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, William	Amount of Contribution (\$) \$3.12
	Contributor address; City; State; Zip Code Atlanta, GA 30309	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) King & Spalding LLP

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Earle, Morgan	7 Amount of Contribution (\$) \$3.57
6 Contributor address; City; State; Zip Code Marlboro, NY 12542		
8 Principal occupation / Job title (See Instructions) New York		9 Employer (See Instructions) New York
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Early, Sara	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Seattle, WA 98115		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Philadelphia, PA 19146		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Philadelphia, PA 19146		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ecklund, Daniel	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code GOOSE CREEK, SC 29445		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) SRC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/267 Rpt: 65/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ecklund, Daniel <hr/> 6 Contributor address; City; State; Zip Code GOOSE CREEK, SC 29445	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) SRC
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edelston, Debra <hr/> Contributor address; City; State; Zip Code Agoura Hills, CA 91301	Amount of Contribution (\$) \$22.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> Contributor address; City; State; Zip Code South Freeport, ME 04078	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> Contributor address; City; State; Zip Code South Freeport, ME 04078	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/267 Rpt: 66/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> 6 Contributor address; City; State; Zip Code South Freeport, ME 04078	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Phillip <hr/> Contributor address; City; State; Zip Code Durham, NC 27705	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Senior Accessibility Designer		Employer (See Instructions) CVS Health
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egan-Keating, Dorothy <hr/> Contributor address; City; State; Zip Code S. Abington, PA 18411	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egenes, Kirsten <hr/> Contributor address; City; State; Zip Code New York, NY 10032	Amount of Contribution (\$) \$12.52
Principal occupation / Job title (See Instructions) server		Employer (See Instructions) Blue Water Grill
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggert, Jessica <hr/> Contributor address; City; State; Zip Code Sartell, MN 56377-1786	Amount of Contribution (\$) \$2.15
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Capital One

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eiger, Diane <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94024	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eiger, Diane <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisenhower, Emily <hr/> Contributor address; City; State; Zip Code Washington, DC 20011	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) EPA
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Noel <hr/> Contributor address; City; State; Zip Code Cave Creek, AZ 85331	Amount of Contribution (\$) \$15.62
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Noel <hr/> Contributor address; City; State; Zip Code Cave Creek, AZ 85331	Amount of Contribution (\$) \$15.62
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/267 Rpt: 68/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellinwood, Jen <hr/> 6 Contributor address; City; State; Zip Code Rosemount, MN 55068	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Regulatory Affairs		9 Employer (See Instructions) 3M
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ely, Randall <hr/> Contributor address; City; State; Zip Code Springfield, IL 62712	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) State of Illinois
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emery, Rachel <hr/> Contributor address; City; State; Zip Code Chicago, IL 60642	Amount of Contribution (\$) \$2.15
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Winnetka Public Schools
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emison, Sharon <hr/> Contributor address; City; State; Zip Code San Ray, CA 94903	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Keurig Dr Pepper

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75093	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Keurig Dr Pepper
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) England, Kathie <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97006	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Organizer Coach		Employer (See Instructions) Time for Success Inc.
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) England, Kathie <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97006	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Organizer Coach		Employer (See Instructions) Time for Success Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) England, Kathie <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97006	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) Organizer Coach		Employer (See Instructions) Time for Success Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth <hr/> Contributor address; City; State; Zip Code Haines City, FL 33844	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/267 Rpt: 70/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth <hr/> 6 Contributor address; City; State; Zip Code Haines City, FL 33844	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) PCSB
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth <hr/> Contributor address; City; State; Zip Code Haines City, FL 33844	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enzie, Rachel <hr/> Contributor address; City; State; Zip Code Mansfield, MA 02048	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Designer/Student		Employer (See Instructions) N/A
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ericson, Elizabeth <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94123	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code Indialantic, FL 32903	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/267 Rpt: 71/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie <hr/> 6 Contributor address; City; State; Zip Code Indialantic, FL 32903	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80223	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Program Analyst		Employer (See Instructions) U.S. EPA
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Alyson <hr/> Contributor address; City; State; Zip Code La Valle, WI 53941	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Public school

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/267 Rpt: 72/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Alyson <hr/> 6 Contributor address; City; State; Zip Code La Valle, WI 53941	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Public school
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Anna Claire <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Barista		Employer (See Instructions) Starbucks
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Douglas <hr/> Contributor address; City; State; Zip Code Cary, NC 27518	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lenovo
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Douglas <hr/> Contributor address; City; State; Zip Code Cary, NC 27518	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lenovo
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Douglas <hr/> Contributor address; City; State; Zip Code Cary, NC 27518	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lenovo

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/267 Rpt: 73/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Douglas <hr/> 6 Contributor address; City; State; Zip Code Cary, NC 27518	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Lenovo
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEITSHANS, MATTHEW <hr/> Contributor address; City; State; Zip Code WEST HOLLYWOOD, CA 90069	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, MICHELLE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90026	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Warner Bros. Home Entertainment
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faires, Sappho <hr/> Contributor address; City; State; Zip Code Emeryville, CA 94608	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) office manager		Employer (See Instructions) AnswerLab
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fancy, Nicola <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90016	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/267 Rpt: 74/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fang, Stephen <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55105	7 Amount of Contribution (\$) \$31.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazio, Nicholas <hr/> Contributor address; City; State; Zip Code Jackson Heights, NY 11372	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) JetBlue Airways Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/267 Rpt: 75/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fermier, Robert <hr/> 6 Contributor address; City; State; Zip Code Newport, OR 97365	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Game Developer		9 Employer (See Instructions) C Prompt Games
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filipowski, Victoria <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30313	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Change Management		Employer (See Instructions) Accenture
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filipowski, Victoria <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30313	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Change Management		Employer (See Instructions) Accenture
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filipowski, Victoria <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30313	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Change Management		Employer (See Instructions) Accenture
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, James <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10026	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Simpson Thacher Bartlett

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/267 Rpt: 76/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> 6 Contributor address; City; State; Zip Code North Kingstown, RI 02852	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Lead Scientist		9 Employer (See Instructions) Navatek Ltd
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Johanna-Laina <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19104	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) ActBlue
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lauren <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, AL 35802	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/267 Rpt: 77/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> 6 Contributor address; City; State; Zip Code Los Gatos, CA 95032	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Varian Medical Systems
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/267 Rpt: 78/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> 6 Contributor address; City; State; Zip Code Penn Valley, PA 19072	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) CSL Behring
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flink, Mason <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Flink Ink Inc
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Jennifer <hr/> Contributor address; City; State; Zip Code La Mesa, CA 91941	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Patent agent		Employer (See Instructions) Wilson Sonsini
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Karen <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517	Amount of Contribution (\$) \$35.72
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/267 Rpt: 79/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Kevin <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79912	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Botanical curator		9 Employer (See Instructions) UTEP
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fode-Thomas, Nicolee <hr/> Contributor address; City; State; Zip Code Rochester, MN 55906	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fournier, Teri <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90077	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Katie <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94108	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Wikimedia foundation
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/267 Rpt: 80/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32608	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Department of Veterans Affairs
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Terri <hr/> Contributor address; City; State; Zip Code Springfield, OR 97477	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedgood, Barbara <hr/> Contributor address; City; State; Zip Code Bearsvilee, NY 12409	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fried, Sandi <hr/> Contributor address; City; State; Zip Code Highland Beach, FL 33487	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/267 Rpt: 81/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fried, Wendy <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) editor		9 Employer (See Instructions) Sterling Words LLC
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenber
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenber
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenber
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisch, Carla <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091-2301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/267 Rpt: 82/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fujimoto, Andrew <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) PMA Inc
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fujimoto, Andrew <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) PMA Inc
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fujimoto, Andrew <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) PMA Inc
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaeta, Marilyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not employed
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaeta, Marilyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/267 Rpt: 83/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaeta, Marilyn <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78249	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Not employed
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sara <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) Center for American Progress
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Thomas <hr/> Contributor address; City; State; Zip Code PHARR, TX 78577	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) CSLAP
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia MD, Catalina E <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia de Quevedo, Theresa <hr/> Contributor address; City; State; Zip Code Boston, MA 02122	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Boston Public Schools

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/267 Rpt: 84/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garfield-Levine, Rachel <hr/> 6 Contributor address; City; State; Zip Code Lafayette, CO 80026	7 Amount of Contribution (\$) \$1.80
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) City of Boulder
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Rose Marie <hr/> Contributor address; City; State; Zip Code Victorville, CA 92495	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Administrative Services Manager		Employer (See Instructions) Apple Valley Fire Protection District
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Rose Marie <hr/> Contributor address; City; State; Zip Code Victorville, CA 92495	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Administrative Services Manager		Employer (See Instructions) Apple Valley Fire Protection District
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Rose Marie <hr/> Contributor address; City; State; Zip Code Victorville, CA 92495	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Administrative Services Manager		Employer (See Instructions) Apple Valley Fire Protection District
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/267 Rpt: 85/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> 6 Contributor address; City; State; Zip Code Oklahoma City, OK 73131	7 Amount of Contribution (\$) \$14.29
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Integrus Medical Group
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebhardt, Mathew <hr/> Contributor address; City; State; Zip Code Chicago, IL 60613	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Facilities Management		Employer (See Instructions) Uber
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gefter, Marcy <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gekas, LeeANn <hr/> Contributor address; City; State; Zip Code Olympia, WA 98506	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/267 Rpt: 86/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geraets, Adam <hr/> 6 Contributor address; City; State; Zip Code Luverne, MN 56156	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) NationSat
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerjuoy, Berri <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06119	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of CT (UConn Health)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gholson, Erica <hr/> Contributor address; City; State; Zip Code Evanston, IL 60202	Amount of Contribution (\$) \$9.37
Principal occupation / Job title (See Instructions) Professional Development in law firm		Employer (See Instructions) McDermott Will & Emery
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gifford, David <hr/> Contributor address; City; State; Zip Code ithaca, NY 14850	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/267 Rpt: 87/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78382	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Volunteer Director		9 Employer (See Instructions) Capital City Village
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginsburgh, Alicia <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) L&D Coach		Employer (See Instructions) BCG
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/267 Rpt: 88/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> 6 Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glazner, Pamela <hr/> Contributor address; City; State; Zip Code Seattle, TX 98115	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glickel, Jacob <hr/> Contributor address; City; State; Zip Code Arlington, MA 02474	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Government		Employer (See Instructions) Massport
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goel, Shivani <hr/> Contributor address; City; State; Zip Code Portland, OR 97229	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Nike

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/267 Rpt: 89/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) Outlines Menswear
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Outlines Menswear
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Outlines Menswear
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Daniel <hr/> Contributor address; City; State; Zip Code Highland Park, NJ 08904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Lisa <hr/> Contributor address; City; State; Zip Code Concord, CA 94518	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Private Academic Library Network of Indiana

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/267 Rpt: 90/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> 6 Contributor address; City; State; Zip Code Elk Grove, CA 95624	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) EGUSD
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Lori <hr/> Contributor address; City; State; Zip Code evanston, IL 60201	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Ui health
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Patrick <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions) UC Regents

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/267 Rpt: 91/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> 6 Contributor address; City; State; Zip Code Allston, MA 02134	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Recruitment Manager		9 Employer (See Instructions) ActBlue
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Melissa <hr/> Contributor address; City; State; Zip Code Pacific Palisades, CA 90272	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Capstone Law APC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/267 Rpt: 92/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> 6 Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Brewery Sales Representative		9 Employer (See Instructions) Wallenpaupack Brewing Co
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Heather <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Sarah <hr/> Contributor address; City; State; Zip Code Albany, CA 94706	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Ceramic Artist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/267 Rpt: 93/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Sarah <hr/> 6 Contributor address; City; State; Zip Code Albany, CA 94706	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Ceramic Artist		9 Employer (See Instructions) Self
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grekin, Peter <hr/> Contributor address; City; State; Zip Code Ridgefield, CT 06877-3327	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Nathan <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Betterment
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Nathan <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Betterment
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Nathan <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Betterment

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/267 Rpt: 94/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Linda <hr/> 6 Contributor address; City; State; Zip Code Parker, CO 80134	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Opes Advisors
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Linda <hr/> Contributor address; City; State; Zip Code Parker, CO 80134	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Opes Advisors
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grogan, Terry <hr/> Contributor address; City; State; Zip Code Reston, VA 20194	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grogan, Terry <hr/> Contributor address; City; State; Zip Code Reston, VA 20194	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grotland, John <hr/> Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Director Product Strategy		Employer (See Instructions) Signal Technologies Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/267 Rpt: 95/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grunewald, Michael <hr/> 6 Contributor address; City; State; Zip Code Tulsa, OK 74114	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Walgreens
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruskos, Alexandra <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruzen, Eric <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607-3622	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) JML Law APLC
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/267 Rpt: 96/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guilford, Caitlin	7 Amount of Contribution (\$) \$3.13
6 Contributor address; City; State; Zip Code Minneapolis, MN 55406		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) OLPR
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code Seattle, WA 98102		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code Seattle, WA 98102		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code Seattle, WA 98102		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gwaltney, Michael	Amount of Contribution (\$) \$62.50
Contributor address; City; State; Zip Code Carrollton, TX 75007		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Titan Factory Direct Homes

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/267 Rpt: 97/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINER, BENJAMIN	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code KAYSVILLE, UT 84037		
8 Principal occupation / Job title (See Instructions) Combat Engineer		9 Employer (See Instructions) USAR
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Pamela	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Syosset, NY 11791		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Epsilon
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Habenicht, Kristian	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Pittsburgh, PA 15205		
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Positive Learning
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackman, Rebecca	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Wheaton, IL 60189		
Principal occupation / Job title (See Instructions) Finance Analyst		Employer (See Instructions) PepsiCo
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Elisabeth	Amount of Contribution (\$) \$20.84
Contributor address; City; State; Zip Code San Pedro, CA 90731		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/267 Rpt: 98/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haines, Charity <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60631	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Fundraiser		9 Employer (See Instructions) Share Our Strength
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Dinorah <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95818	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) analyst		Employer (See Instructions) state of california

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/267 Rpt: 99/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> 6 Contributor address; City; State; Zip Code Issaquah, WA 98029	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Self
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Leigh <hr/> Contributor address; City; State; Zip Code Glen Ellen, CA 95442	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamada, Yoshihito <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19147	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Director Portfolio Reporting		Employer (See Instructions) Brixmor Property Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/267 Rpt: 100/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Anjarae <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, TX 90027	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) Square Inc
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Anjarae <hr/> Contributor address; City; State; Zip Code Los Angeles, TX 90027	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Square Inc
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Aysha <hr/> Contributor address; City; State; Zip Code Cathedral City, CA 92234	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Upright Position Communications
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Nathaniel <hr/> Contributor address; City; State; Zip Code Long Island City, NY 11101	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Business Development Associate		Employer (See Instructions) Self
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Bruce <hr/> Contributor address; City; State; Zip Code Lacey, WA 98503	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/267 Rpt: 101/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardenberg, Wendeline <hr/> 6 Contributor address; City; State; Zip Code New Haven, CT 06515	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Southern Connecticut State University
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/267 Rpt: 102/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97330	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Oregon Health Sciences University
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/267 Rpt: 103/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92102	7 Amount of Contribution (\$) \$4.55
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Foresight Sports
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Elissa <hr/> Contributor address; City; State; Zip Code Moundridge, KS 67107	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Bethel College
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/267 Rpt: 104/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M <hr/> 6 Contributor address; City; State; Zip Code El Cajon, CA 92020	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Rn		9 Employer (See Instructions) Self
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code El Cajon, CA 92020	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code El Cajon, CA 92020	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Nicole <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Director of Communications		Employer (See Instructions) Bayer
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Audrey <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Twilio

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/267 Rpt: 105/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healy, Debra	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Redmond, WA 98053		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sharon	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code Santa Fe, NM 87507		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heeb, William	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Cincinnati, OH 45215		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heideman, Lynda	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Palo Alto, CA 94303		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) School
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helm, Margot	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code San Jose, CA 95112		
Principal occupation / Job title (See Instructions) Grants & Database Administrator		Employer (See Instructions) Silicon Valley Creates

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/267 Rpt: 106/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermesen, Bryan <hr/> 6 Contributor address; City; State; Zip Code Lincoln, NE 68506	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) State
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Matthew <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Booz Allen Hamilton
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Matthew <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Booz Allen Hamilton
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Matthew <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Booz Allen Hamilton
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/267 Rpt: 107/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117	7 Amount of Contribution (\$) \$5.72
8 Principal occupation / Job title (See Instructions) Drug Safety Manger		9 Employer (See Instructions) Ultragenyx
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/267 Rpt: 108/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Jason <hr/> 6 Contributor address; City; State; Zip Code West Hollywood, CA 90046	7 Amount of Contribution (\$) \$14.29
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Omnicom
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Patrick <hr/> Contributor address; City; State; Zip Code Monroe, CT 06468	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) Summit Education Group
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Patrick <hr/> Contributor address; City; State; Zip Code Monroe, CT 06468	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) Summit Education Group
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Patrick <hr/> Contributor address; City; State; Zip Code Monroe, CT 06468	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) Summit Education Group
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Patrick <hr/> Contributor address; City; State; Zip Code Monroe, CT 06468	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) Summit Education Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/267 Rpt: 109/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Erin <hr/> 6 Contributor address; City; State; Zip Code Xenia, OH 45385	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) McGrawHill
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, AP 02280	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, AP 02280	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, AP 02280	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Morgan <hr/> Contributor address; City; State; Zip Code Chicago, IL 60657	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Enterprise Account Manager		Employer (See Instructions) Chowly Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/267 Rpt: 110/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, William <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Freelance writer		9 Employer (See Instructions) Self
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobson, Lauren <hr/> Contributor address; City; State; Zip Code Portland, OR 97206	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Medical Teams
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobson, Lauren <hr/> Contributor address; City; State; Zip Code Portland, OR 97206	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Medical Teams
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Claire <hr/> Contributor address; City; State; Zip Code Stevens Point, WI 54481-1045	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Scanning Technician		Employer (See Instructions) Sentry Insurance

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/267 Rpt: 111/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> 6 Contributor address; City; State; Zip Code Everett, WA 98208	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Senior Management Analyst		9 Employer (See Instructions) SSA
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> Contributor address; City; State; Zip Code Everett, WA 98208	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> Contributor address; City; State; Zip Code Everett, WA 98208	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoopengardner, Jessica <hr/> Contributor address; City; State; Zip Code Christiansburg, VA 24073	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Virginia Tech
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoopengardner, Matthew <hr/> Contributor address; City; State; Zip Code Austin, TX 78613	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Main Estimator/Lead Carpenter/Principal		Employer (See Instructions) Blue Sky Design Build LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/267 Rpt: 112/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Janet <hr/> 6 Contributor address; City; State; Zip Code Cranford, NJ 07016-2335	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) housewife		9 Employer (See Instructions) self
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Shane <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73162	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Shanghai university of finance and economics
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Director PV Systems		Employer (See Instructions) Acadia Pharmaceutical

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/267 Rpt: 113/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, David <hr/> 6 Contributor address; City; State; Zip Code West Hartford, CT 06110	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hou, Yu <hr/> Contributor address; City; State; Zip Code Davis, TX 95616	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) California
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, Vance <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howley, Christine <hr/> Contributor address; City; State; Zip Code Lakewood, OH 44107	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Member Manager		Employer (See Instructions) Accelerant Holdings
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Alexandra <hr/> Contributor address; City; State; Zip Code Hudson, OH 44236	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) School Psychologist		Employer (See Instructions) Streetsboro City Schools

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> 6 Contributor address; City; State; Zip Code Fort worth, TX 76109	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Independent contractor
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Independent contractor
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Independent contractor
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Lauren <hr/> Contributor address; City; State; Zip Code Eugene, OR 97403	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) THATLifeStyleNinja LLC
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Susan <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Washington Medical Center

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/267 Rpt: 115/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Susan <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98105	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) University of Washington Medical Center
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingold-Smith, McCaila <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Manager Research Education		Employer (See Instructions) RTI International

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/267 Rpt: 116/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Nancy <hr/> 6 Contributor address; City; State; Zip Code West Hartford, CT 06110	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jadaun, Priyamvada <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Applied Materials
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janes, Andy <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Political Affairs		Employer (See Instructions) Global Affairs Canada
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janowitz, Naomi <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of California Davis
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/267 Rpt: 117/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> 6 Contributor address; City; State; Zip Code Littleton, CO 80125	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Emily <hr/> Contributor address; City; State; Zip Code Roseville, CA 95747	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) CSO		Employer (See Instructions) PHC
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Vernetta <hr/> Contributor address; City; State; Zip Code HUGHESVILLE, MD 20637	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Admin Assistant		Employer (See Instructions) Federal Government

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/267 Rpt: 118/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson Mullican, Deanna <hr/> 6 Contributor address; City; State; Zip Code Phoenix, AZ 85013	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Graphic designer		9 Employer (See Instructions) Arizona State University
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland <hr/> Contributor address; City; State; Zip Code Semmes, AL 36575	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland <hr/> Contributor address; City; State; Zip Code Semmes, AL 36575	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland <hr/> Contributor address; City; State; Zip Code Semmes, AL 36575	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> Contributor address; City; State; Zip Code South Boston, MA 02127	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/267 Rpt: 119/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> 6 Contributor address; City; State; Zip Code South Boston, MA 02127	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Financial Analyst		9 Employer (See Instructions) Akamai Technologies
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahan, Leslie <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90067	Amount of Contribution (\$) \$43.75
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Netflix
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformist
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/267 Rpt: 120/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplan, Eli <hr/> 6 Contributor address; City; State; Zip Code Takoma Park, MD 20912	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Photographer/Director		9 Employer (See Instructions) self-employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kause, Suzanne <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15218	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Medical director		Employer (See Instructions) UPMC healthplan
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kavcsak, Chris <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) McKinsey & Company
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Lauren <hr/> Contributor address; City; State; Zip Code Charleston, SC 29412	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Assistant manager		Employer (See Instructions) CCPRC
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefe, Dan <hr/> Contributor address; City; State; Zip Code Herndon, VA 20171	Amount of Contribution (\$) \$35.72
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) DHS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/267 Rpt: 121/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keegin, Susan <hr/> 6 Contributor address; City; State; Zip Code Sausalito, CA 94965	7 Amount of Contribution (\$) \$14.29
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Rebecca <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EUSD
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellerman, Rachel <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Teacher Librarian		Employer (See Instructions) Palo Alto Unified School District
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21043	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21043	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/267 Rpt: 122/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Ellicott City, MD 21043		
8 Principal occupation / Job title (See Instructions) computer science		9 Employer (See Instructions) Retired - low fixed income
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Ellicott City, MD 21043		
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ellicott City, MD 21043		
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Ellicott City, MD 21043		
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ellicott City, MD 21043		
Principal occupation / Job title (See Instructions) computer science		Employer (See Instructions) Retired - low fixed income

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/267 Rpt: 123/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenyon, Catherine <hr/> 6 Contributor address; City; State; Zip Code Arcata, CA 95521	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kern, Cindy <hr/> Contributor address; City; State; Zip Code WINSTON SALEM, NC 27104	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Self employed
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kern, Cindy <hr/> Contributor address; City; State; Zip Code WINSTON SALEM, NC 27104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Self employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerrigan, Marie <hr/> Contributor address; City; State; Zip Code Hope, RI 02831-1736	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) registered nurse		Employer (See Instructions) Bayada Home Healthcare
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerst, Ashley <hr/> Contributor address; City; State; Zip Code Madison, WI 53703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/267 Rpt: 124/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketchaver, James <hr/> 6 Contributor address; City; State; Zip Code Lakewood, OH 44107	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Manager of IT		9 Employer (See Instructions) Fathom
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketchaver, James <hr/> Contributor address; City; State; Zip Code Lakewood, OH 44107	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Manager of IT		Employer (See Instructions) Fathom
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyes, Bridget <hr/> Contributor address; City; State; Zip Code New Haven, CT 06515	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) software		Employer (See Instructions) graphika
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khazen, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kile, Nancy <hr/> Contributor address; City; State; Zip Code Oak Ridge, TN 37830	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FNP		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/267 Rpt: 125/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Karen <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92618	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Blue Shield of CA
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, alisha <hr/> Contributor address; City; State; Zip Code san antonio, TX 78209	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) VA
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/267 Rpt: 126/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsh, Barbara <hr/> 6 Contributor address; City; State; Zip Code Pennington, NJ 08534	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Sociologist		9 Employer (See Instructions) ETS
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsh, Barbara <hr/> Contributor address; City; State; Zip Code Pennington, NJ 08534	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sociologist		Employer (See Instructions) ETS
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/267 Rpt: 127/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80223	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) Prologis
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klodginski, Robert <hr/> Contributor address; City; State; Zip Code San antonio, TX 78212	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Design manager		Employer (See Instructions) Timberlyne
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klodginski, Robert <hr/> Contributor address; City; State; Zip Code San antonio, TX 78212	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Design manager		Employer (See Instructions) Timberlyne
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klodginski, Robert <hr/> Contributor address; City; State; Zip Code San antonio, TX 78212	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Design manager		Employer (See Instructions) Timberlyne

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/267 Rpt: 128/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knipmeyer, Michelle	7 Amount of Contribution (\$) \$1.25
6 Contributor address; City; State; Zip Code Chicago, IL 60622		
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) Visa
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Leah	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code Brooklyn, NY 11230		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kogen, Jay	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Angeles, CA 90077		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Retrograde Films Inc.
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koman, James	Amount of Contribution (\$) \$3.58
Contributor address; City; State; Zip Code Oakland, CA 94608		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koman, James	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Oakland, CA 94608		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/267 Rpt: 129/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koman, James <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94608	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Scientist		9 Employer (See Instructions) Zymergen
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koman, James <hr/> Contributor address; City; State; Zip Code Oakland, CA 94608	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koren, Pat <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krakirian, Shahe <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Marvell Semiconductor
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Michelle <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$3.28
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Repligen

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/267 Rpt: 130/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krecker, Margaret <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53704	7 Amount of Contribution (\$) \$1.42
8 Principal occupation / Job title (See Instructions) Senior Director		9 Employer (See Instructions) Tetra Tech
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulesa, Lauren <hr/> Contributor address; City; State; Zip Code Monroe Twp, NJ 08831	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuning, Patricia <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87114	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Real Image Productions
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurens, Stephen <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19130	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGOMARSINO, ANDREW <hr/> Contributor address; City; State; Zip Code Hoboken, NJ 07030	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) LiveIntent

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/267 Rpt: 131/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> 6 Contributor address; City; State; Zip Code Livermore, CA 94550	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Nanny		9 Employer (See Instructions) Reynolds Family
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Livermore, CA 94550	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Livermore, CA 94550	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Tumwater, WA 98512	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Royal Restrooms
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Livermore, CA 98512	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/267 Rpt: 132/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> 6 Contributor address; City; State; Zip Code Tumwater, WA 98512	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Administration		9 Employer (See Instructions) Royal Restrooms
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, TX 19380	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, TX 19380	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, TX 19380	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainer, Lisa <hr/> Contributor address; City; State; Zip Code Los Angeles, TX 91316	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) SREI

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/267 Rpt: 133/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Melody <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Julie <hr/> Contributor address; City; State; Zip Code Portland, OR 97212	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Julie <hr/> Contributor address; City; State; Zip Code Portland, OR 97212	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Julie <hr/> Contributor address; City; State; Zip Code Portland, OR 97212	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/267 Rpt: 134/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> 6 Contributor address; City; State; Zip Code Port Townsend, WA 98368	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Jon <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92008	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/267 Rpt: 135/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Teri <hr/> 6 Contributor address; City; State; Zip Code Maplewood, MN 55119	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Research Analyst		9 Employer (See Instructions) Applied Policy Research Inc.
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/267 Rpt: 136/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Palos Hills, IL 60465	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/267 Rpt: 137/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavoie, Shawn <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98115	7 Amount of Contribution (\$) \$4.50
8 Principal occupation / Job title (See Instructions) Software engineer		9 Employer (See Instructions) DocuSign
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Josh <hr/> Contributor address; City; State; Zip Code Downingtown, PA 19335	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Windish Music & Productions LLC
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lecrone, Mitchell <hr/> Contributor address; City; State; Zip Code San Diego, CA 92116	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Digital Marketing		Employer (See Instructions) AMN Healthcare
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Dana <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89135	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeming, Hunter <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) N/a		Employer (See Instructions) N/a

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/267 Rpt: 138/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Emily <hr/> 6 Contributor address; City; State; Zip Code Santa Clara, CA 95051	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Creative Director		9 Employer (See Instructions) Apple
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Suzanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) AT&T Services
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Stacy <hr/> Contributor address; City; State; Zip Code Wheaton, IL 60189	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) HR Manager		Employer (See Instructions) Macy's
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leuthe, Leuthe <hr/> Contributor address; City; State; Zip Code Buffalo, NY 14222	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine-Jeffery, Beth <hr/> Contributor address; City; State; Zip Code Anaheim, CA 92808	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Buyer		Employer (See Instructions) Hospital

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/267 Rpt: 139/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice <hr/> 6 Contributor address; City; State; Zip Code Fairfax, VA 22032	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions) George Mason University
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Rebecca <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Eleanor <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21211	Amount of Contribution (\$) \$2.14
Principal occupation / Job title (See Instructions) Editor/Writer		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/267 Rpt: 140/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> 6 Contributor address; City; State; Zip Code Jackson, WY 83002	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindeke, Kathy <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Straderhallett

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/267 Rpt: 141/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linkens, Gavin <hr/> 6 Contributor address; City; State; Zip Code Cranford, NJ 07016	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Senior IT Support Specialist		9 Employer (See Instructions) MongoDB
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linkens, Gavin <hr/> Contributor address; City; State; Zip Code Cranford, NJ 07016	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Senior IT Support Specialist		Employer (See Instructions) MongoDB
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liotard, Marcia <hr/> Contributor address; City; State; Zip Code VT 05487	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134	Amount of Contribution (\$) \$5.40
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134	Amount of Contribution (\$) \$5.40
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/267 Rpt: 142/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liu, Heather <hr/> 6 Contributor address; City; State; Zip Code Chandler, AZ 85249	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Speech therapist		9 Employer (See Instructions) Heather liu
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liu, Heather <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85249	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Speech therapist		Employer (See Instructions) Heather liu
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockie, Jonathan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11222	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) massage therapy		Employer (See Instructions) self
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockie, Jonathan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11222	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) massage therapist		Employer (See Instructions) self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longstaff, L <hr/> Contributor address; City; State; Zip Code Williamsburg, KS 66095	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) IT Analyst		Employer (See Instructions) Garmin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/267 Rpt: 143/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorraine, Barbara <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77803	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Margaret <hr/> Contributor address; City; State; Zip Code Seattle, WA 98126	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/267 Rpt: 144/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Medical Social Worker		9 Employer (See Instructions) Mission Hospice
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/267 Rpt: 145/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Jessica <hr/> 6 Contributor address; City; State; Zip Code Moretown, VT 05660	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Speech Language Pathologist		9 Employer (See Instructions) South Burlington School District
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/267 Rpt: 146/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> 6 Contributor address; City; State; Zip Code Elizabeth, IN 47117	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) cancer registry-ctr		9 Employer (See Instructions) u of I hospital
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ma, Aileen <hr/> Contributor address; City; State; Zip Code FORT MILL, SC 29715	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) bank of america
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacGibbon, Patricia <hr/> Contributor address; City; State; Zip Code Tarpon Springs, FL 34689	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Trade Compliance		Employer (See Instructions) Pall Corp
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/267 Rpt: 147/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maceiras, Rachel <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Viacom
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macia, Samantha <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Temp (Data Services Admin)		Employer (See Instructions) Hudson (NZ Temp Agency)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Sarah <hr/> Contributor address; City; State; Zip Code Seattle, WA 98112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Tupper Mack Wells PLLC
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/267 Rpt: 148/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> 6 Contributor address; City; State; Zip Code Kissimmee, FL 34741	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) System Analyst		9 Employer (See Instructions) Disney Cruise Line
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magill, Raven A <hr/> Contributor address; City; State; Zip Code Marietta, NY 13110	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Process Management Support		Employer (See Instructions) CompNova
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire, Mary Ann <hr/> Contributor address; City; State; Zip Code ASTORIA, NY 11106	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Housekeeper		Employer (See Instructions) D. Zucker
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95405	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95405	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/267 Rpt: 149/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Santa Rosa, CA 95405	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) CSU
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahne, Ashley <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Pfizer
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahon, Janine <hr/> Contributor address; City; State; Zip Code Roseville, CA 95747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Stepping Stones Group
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malcolm, Keith <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07042	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Do Not Wish to divulge
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malingo, Karon <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22314	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallipeddi, Venkata Harish <hr/> Contributor address; City; State; Zip Code Camano Island, WA 98282	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Stripe
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandelbaum, Melissa <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Meta
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manganello, Michael <hr/> Contributor address; City; State; Zip Code Jenkintown, PA 19046	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) CollegeBoard
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Client Services Specialist		Employer (See Instructions) SeatGeek

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/267 Rpt: 151/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11226	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Client Services Specialist		9 Employer (See Instructions) SeatGeek
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Client Services Specialist		Employer (See Instructions) SeatGeek
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Shirley <hr/> Contributor address; City; State; Zip Code Hawthorne, CA 90250	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/267 Rpt: 152/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marden, Aaron <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02141	7 Amount of Contribution (\$) \$14.29
8 Principal occupation / Job title (See Instructions) manager		9 Employer (See Instructions) Mathematica
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Jodi <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Bookseller		Employer (See Instructions) Blue Cypress Books
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, John <hr/> Contributor address; City; State; Zip Code Union, KY 41091	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) BlueStar
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Miguel <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) UnitedHealth Group
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matalon, Dena <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$27.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Stanford University

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matsuoka, Tai	7 Amount of Contribution (\$) \$3.12
6 Contributor address; City; State; Zip Code Clarence, NY 14031		
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matura, Kevin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Miller Place, NY 11764		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hauppauge UFSD
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maturo, Clark	Amount of Contribution (\$) \$2.77
Contributor address; City; State; Zip Code Brooklyn, NY 11249		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ViralGains
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maturo, Clark	Amount of Contribution (\$) \$2.77
Contributor address; City; State; Zip Code Brooklyn, NY 11249		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ViralGains
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maus, Kate	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code Philadelphia, PA 19119		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/267 Rpt: 154/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mawdsley, Anne <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94611	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Pilates instructor and business owner		9 Employer (See Instructions) Optimum Pilates LLC
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayer, Heidi <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) PT		Employer (See Instructions) Orchard Medical
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayers, Lynne <hr/> Contributor address; City; State; Zip Code Saint Petersburg, TX 33704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Blank
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, John <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$8.89
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) VanderHouwen
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, JNene <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98312	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) SERVPRO of Kitsap Co

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Zynga Inc
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Eric <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Team Detroit

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/267 Rpt: 157/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Erin <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98112	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Biologist		9 Employer (See Instructions) EKM Scientific Consulting
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McConnell, Sarah <hr/> Contributor address; City; State; Zip Code Rochester, NY 14620	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Assistant Professor		Employer (See Instructions) University of Rochester
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCurdy, Mary <hr/> Contributor address; City; State; Zip Code Auburn, CA 95603	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jennifer <hr/> Contributor address; City; State; Zip Code Seattle, WA 98106	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Acxiom
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Noelle <hr/> Contributor address; City; State; Zip Code Western Springs, IL 60558	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) library clerk		Employer (See Instructions) La Grange Public Library

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/267 Rpt: 158/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10019	7 Amount of Contribution (\$) \$2.78
8 Principal occupation / Job title (See Instructions) Flight attendant		9 Employer (See Instructions) Delta air Lines
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10019	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHugh, Catherine <hr/> Contributor address; City; State; Zip Code Seattle, WA 98112	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Digital Strategist		Employer (See Instructions) PATH
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Sean <hr/> Contributor address; City; State; Zip Code Seattle, WA 98122	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CFS		Employer (See Instructions) US Census
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Sean <hr/> Contributor address; City; State; Zip Code Seattle, WA 98122	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CFS		Employer (See Instructions) US Census

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/267 Rpt: 159/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKeon, Richard <hr/> 6 Contributor address; City; State; Zip Code Berkeley Heights, NJ 07922	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKibben, Constance <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Angela <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Boston Medical Center
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Maura <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91411	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamee, Margaret <hr/> Contributor address; City; State; Zip Code GROSSE POINTE Woods, MI 48236-1906	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/267 Rpt: 160/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$4.16
8 Principal occupation / Job title (See Instructions) Senior Sales Engineer		9 Employer (See Instructions) Tessian
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Senior Sales Engineer		Employer (See Instructions) Tessian
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Senior Sales Engineer		Employer (See Instructions) Tessian
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPhillips, Francis <hr/> Contributor address; City; State; Zip Code HUNTINGTOWN, MD 20639	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) U.S. Census Bureau
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVicker, Kathryn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98109	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) City of Seattle

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mechler, Andrew <hr/> 6 Contributor address; City; State; Zip Code Mission, KS 66205	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Architectural Designer		9 Employer (See Instructions) BRR Architecture Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meier, Diane <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Memmott, Nicole <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97006	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messano, Lisa <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) communications		Employer (See Instructions) Michael Baker Intl

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mevisen, John <hr/> 6 Contributor address; City; State; Zip Code Edmonds, WA 98026	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Google Inc
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaelides, Evan <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Four Square Design Studio LLC
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Corynn <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) LWSD
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Craig <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Scientist/Teacher		Employer (See Instructions) University of California
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired

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2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) special ed consultant		9 Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/267 Rpt: 164/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Medzon, Daniel <hr/> 6 Contributor address; City; State; Zip Code Arlington, MA 02474	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) DevOps Engineer		9 Employer (See Instructions) Sonos Inc
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Medzon, Daniel <hr/> Contributor address; City; State; Zip Code Arlington, MA 02474	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Sonos Inc
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Medzon, Daniel <hr/> Contributor address; City; State; Zip Code Arlington, MA 02474	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Sonos Inc
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Kymberly <hr/> Contributor address; City; State; Zip Code Rockville, MD 20850	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Underwriting Supervisor		Employer (See Instructions) United Educators
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millstone, Sacha <hr/> Contributor address; City; State; Zip Code Denver, TX 80206	Amount of Contribution (\$) \$35.72
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/267 Rpt: 165/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millstone, Sacha <hr/> 6 Contributor address; City; State; Zip Code Denver, TX 80206	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) Millstone Evans Group
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millstone, Sacha <hr/> Contributor address; City; State; Zip Code Denver, TX 80206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minery, Melissa <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) school counselor		Employer (See Instructions) Spark Academy of Advanced Technologies
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mistree, Behram <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94085	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Google
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/267 Rpt: 166/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mlady, Grace <hr/> 6 Contributor address; City; State; Zip Code Watertown, MA 02472	7 Amount of Contribution (\$) \$3.89
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) MIT
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molina, Mauricio <hr/> Contributor address; City; State; Zip Code Riverbank, CA 95367	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Assistive Technology Instructor		Employer (See Instructions) Visually Impaired Persons Support
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code FPO, AP 96362-2599	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code FPO, AP 96362-2599	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code FPO, AP 96362-2599	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/267 Rpt: 167/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, Peggy	7 Amount of Contribution (\$) \$2.86
	6 Contributor address; City; State; Zip Code Yellville, AR 72687-7965	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Regan	Amount of Contribution (\$) \$7.14
	Contributor address; City; State; Zip Code Brooklyn, NY 11211	
Principal occupation / Job title (See Instructions) Video Business Lead		Employer (See Instructions) CafeMedia
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris-Knowler, Neill	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11217	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Brooklyn Urban Garden Charter
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Laurie	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Northbrook, IL 60062	
Principal occupation / Job title (See Instructions) speech therapist		Employer (See Instructions) centerwell
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Virginia	Amount of Contribution (\$) \$1.43
	Contributor address; City; State; Zip Code New Orleans, LA 70115	
Principal occupation / Job title (See Instructions) Special Master		Employer (See Instructions) Collaboration Specialists

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/267 Rpt: 168/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moura, Mathew <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10025	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Teaching Matters
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullis, Barry <hr/> Contributor address; City; State; Zip Code Mooresville, NC 28115	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Daetwyler
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie A. <hr/> Contributor address; City; State; Zip Code Templeton, CA 93465-4501	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/267 Rpt: 169/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie A.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Templeton, CA 93465-4501	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie A.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Templeton, CA 93465-4501	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Valencia, CA 91354	
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Valencia, CA 91354	
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Valencia, CA 91354	
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/267 Rpt: 170/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musselman, KT <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$1.23
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Williamson County
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadeau, Catherine <hr/> Contributor address; City; State; Zip Code Oldsmar, FL 34677	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nagel, Natalie <hr/> Contributor address; City; State; Zip Code Toledo, OH 43617	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/267 Rpt: 171/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32601	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) ARNP		9 Employer (See Instructions) UF
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natesan, Sinthumathi <hr/> Contributor address; City; State; Zip Code Emeryville, CA 94608	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naversen, Leina <hr/> Contributor address; City; State; Zip Code Portland, OR 97223	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Bora Architects

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/267 Rpt: 172/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nee, Pauline <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, TX 90027	7 Amount of Contribution (\$) \$31.25
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Self
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newark, William <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/267 Rpt: 173/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Taylor <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Stripe Inc.
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Taylor <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Taylor <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Judith <hr/> Contributor address; City; State; Zip Code Westborough, MA 01581	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/267 Rpt: 174/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> 6 Contributor address; City; State; Zip Code Millburn, NJ 07041	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Bristol Myers Squibb
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code Millburn, NJ 07041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Melynda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Donnell, Kelly <hr/> Contributor address; City; State; Zip Code Lynbrook, NY 11563	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) CUNY
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oles, Amanda <hr/> Contributor address; City; State; Zip Code Newburyport, MA 01950	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Marketing Assistant		Employer (See Instructions) Bright Horizons

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/267 Rpt: 175/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ollis, Valerie <hr/> 6 Contributor address; City; State; Zip Code New Albany, IN 47150	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Senior professional		9 Employer (See Instructions) Humana
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ombach, Genie <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28270	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Bank of America
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orenstein, Ron <hr/> Contributor address; City; State; Zip Code West Hills, CA 91307	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Dance Dimensions
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Dan <hr/> Contributor address; City; State; Zip Code Concord, CA 94521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Bank of the West
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/267 Rpt: 176/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palomo, carola <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32608	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Education Technology		9 Employer (See Instructions) ACI Learning
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code Lake Clear, NY 12945	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code Lake Clear, NY 12945	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code Lake Clear, NY 12945	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pao, Charlotte <hr/> Contributor address; City; State; Zip Code New York, NY 10014	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Graphic Designer		Employer (See Instructions) Charlotte Pao

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/267 Rpt: 177/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> 6 Contributor address; City; State; Zip Code Little Rock, AR 72202	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Pappalardo Media Co
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Kristina <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Kristina <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/267 Rpt: 178/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Caroline <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, VA 22405	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Kelle <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) AIR
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partee, David <hr/> Contributor address; City; State; Zip Code Fairbanks, AK 99712-3061	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Information systems consultant		Employer (See Instructions) University of Alaska Fairbanks
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partridge, Claire <hr/> Contributor address; City; State; Zip Code Narberth, PA 19072	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Employee Support Intern		Employer (See Instructions) Hershey Entertainment and Resorts
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Bindi <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Glenbard

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/267 Rpt: 179/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Joyce <hr/> 6 Contributor address; City; State; Zip Code Stockton, NJ 08559	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulson, William <hr/> Contributor address; City; State; Zip Code Needham, MA 02492	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Prudential Advantage Real Estate
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Carol <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payton, Alexa <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) venture capital		Employer (See Instructions) Growth Warrior Capital
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pegler, Michelle <hr/> Contributor address; City; State; Zip Code Salem, OR 97306	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Data Consultant		Employer (See Instructions) UDig

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/267 Rpt: 180/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington, Nathan <hr/> 6 Contributor address; City; State; Zip Code Omaha, NE 68102	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Creighton University
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perelman, Jenna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$2.23
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Ohmconnect
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perelman, Jenna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$2.23
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Ohmconnect
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Elizabeth <hr/> Contributor address; City; State; Zip Code Aguada 000602 Puerto Rico	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perlstein, Debbie <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$4.38
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Levine Academy

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/267 Rpt: 181/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrine, Alexander <hr/> 6 Contributor address; City; State; Zip Code Lakeville, MN 55044	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Actuary		9 Employer (See Instructions) Brown & Brown
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code Friday Harbor, WA 98250	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code Friday Harbor, WA 98250	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code Friday Harbor, WA 98250	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92129	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/267 Rpt: 182/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily <hr/> 6 Contributor address; City; State; Zip Code Crownsville, MD 21032	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Horse Trainer		9 Employer (See Instructions) self employed
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code Crownsville, MD 21032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code Crownsville, MD 21032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/267 Rpt: 183/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phalen, Lizanne <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60615	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Alhad <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Principal Flow Assurance Engineer		Employer (See Instructions) Schlumberger
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Timothy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NLRB
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Timothy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NLRB
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Timothy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NLRB

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/267 Rpt: 184/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipkin-West, Shawn <hr/> 6 Contributor address; City; State; Zip Code Chatsworth, CA 91311	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plotts, Jon <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35802	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Saw engineer		Employer (See Instructions) Saic
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Elisabeth <hr/> Contributor address; City; State; Zip Code Urbana, IL 61801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Federal Defender		Employer (See Instructions) US GOVT
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Kevin <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95821	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Instructional Services Assistant		Employer (See Instructions) Los Rios Community College District
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> Contributor address; City; State; Zip Code donna, TX 78537	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/267 Rpt: 185/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code donna, TX 78537		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pratt, Anne C	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Millbrook, NY 12545		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Lawndale, CA 90260		
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Lawndale, CA 90260		
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Lawndale, CA 90260		
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/267 Rpt: 186/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pristash, Jason <hr/> 6 Contributor address; City; State; Zip Code Roswell, GA 30076	7 Amount of Contribution (\$) \$4.38
8 Principal occupation / Job title (See Instructions) Receiving Specialist		9 Employer (See Instructions) The Fresh Market
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pubillones, Christopher <hr/> Contributor address; City; State; Zip Code Herndon, VA 20171	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Northrop Grumman
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1,300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/267 Rpt: 187/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> 6 Contributor address; City; State; Zip Code Edinburg, TX 78539	7 Amount of Contribution (\$) \$650.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/267 Rpt: 188/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Edinburg, TX 78539		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group	Amount of Contribution (\$) \$2,400.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/267 Rpt: 189/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> 6 Contributor address; City; State; Zip Code Edinburg, TX 78539	7 Amount of Contribution (\$) \$925.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Public Research Group <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qi, Mei <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Development Manager		Employer (See Instructions) Asia Society Texas Center
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Ryan <hr/> Contributor address; City; State; Zip Code Selkirk, NY 12158	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/267 Rpt: 190/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Ryan <hr/> 6 Contributor address; City; State; Zip Code Selkirk, NY 12158	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Stonewall Defense LLC
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Susan <hr/> Contributor address; City; State; Zip Code New York, TX 10019	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Law firm management		Employer (See Instructions) Morrison & Foerster LLP
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raferty, Sara <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11220	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Legal Aid Society
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raferty, Sara <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11220	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Legal Aid Society
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen <hr/> Contributor address; City; State; Zip Code Marion, VA 24354	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/267 Rpt: 191/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen <hr/> 6 Contributor address; City; State; Zip Code Marion, VA 24354	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen <hr/> Contributor address; City; State; Zip Code Marion, VA 24354	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code morganville, NJ 07751	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code morganville, NJ 07751	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code morganville, NJ 07751	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/267 Rpt: 192/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran <hr/> 6 Contributor address; City; State; Zip Code morganville, NJ 07751	7 Amount of Contribution (\$) \$7.15
8 Principal occupation / Job title (See Instructions) Doctor		9 Employer (See Instructions) Self
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code morganville, NJ 07751	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramah, Roxanne <hr/> Contributor address; City; State; Zip Code Shrewsbury, VT 05738	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raman, Sabrina <hr/> Contributor address; City; State; Zip Code Redmond, WA 98052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Kristie <hr/> Contributor address; City; State; Zip Code San Jose, CA 95110	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Sr. Technical Program Manager		Employer (See Instructions) Sony Interactive Entertainment

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/267 Rpt: 193/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Natalie <hr/> 6 Contributor address; City; State; Zip Code West Hollywood, CA 90069	7 Amount of Contribution (\$) \$11.11
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UCLA
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Rebecca <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06107	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) EARTH University
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Rebecca <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06107	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) EARTH University
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90807	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90807	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/267 Rpt: 194/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90807	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Los Angeles County
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Jennifer <hr/> Contributor address; City; State; Zip Code Woodland, CA 95695	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Yolo County Flood Control
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renz, Amy <hr/> Contributor address; City; State; Zip Code Port Saint Lucie, FL 34987	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) RGP
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reppond, Judy <hr/> Contributor address; City; State; Zip Code Rialto, CA 92376	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Unitek
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reppond, Judy <hr/> Contributor address; City; State; Zip Code Rialto, CA 92376	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Unitek

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/267 Rpt: 195/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resnick, Michael <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55416	7 Amount of Contribution (\$) \$7.15
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revello, Katharine <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Plymouth Housing
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Gabriel <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) USGS
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Gabriel <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$27.77
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) USGS
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Gabriel <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$20.83
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) USGS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/267 Rpt: 196/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Noe <hr/> 6 Contributor address; City; State; Zip Code Hidalgo, TX	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Gail <hr/> Contributor address; City; State; Zip Code HIGGANUM, CT 06441	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) University of Connecticut

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/267 Rpt: 197/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94114	7 Amount of Contribution (\$) \$1.88
8 Principal occupation / Job title (See Instructions) tech writer		9 Employer (See Instructions) Apple Inc
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rife, Nathan <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93551	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) USAF
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/267 Rpt: 198/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20009	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Reingold
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, Patricia <hr/> Contributor address; City; State; Zip Code Milwaukie, OR 97267	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) OAG		Employer (See Instructions) manager
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Sarah <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, Mark <hr/> Contributor address; City; State; Zip Code Berrien Springs, MI 49103	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Notre Dame

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/267 Rpt: 199/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97213	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Operational Strategy		9 Employer (See Instructions) Self
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code Portland, OR 97213	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Karen <hr/> Contributor address; City; State; Zip Code Anacortes, WA 98221	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Karen <hr/> Contributor address; City; State; Zip Code Anacortes, WA 98221	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohr, Kari <hr/> Contributor address; City; State; Zip Code Riverside, CA 92506	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Speech language pathologist		Employer (See Instructions) Jurupa USD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/267 Rpt: 200/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland, Sarah <hr/> 6 Contributor address; City; State; Zip Code Casselberry, FL 32707	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Portfolio Manager		9 Employer (See Instructions) Truist
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roman, Marisa <hr/> Contributor address; City; State; Zip Code Charlestown, MA 02129	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Tapestry Networks

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/267 Rpt: 201/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roman, Marisa <hr/> 6 Contributor address; City; State; Zip Code Charlestown, MA 02129	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Tapestry Networks
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roman, Marisa <hr/> Contributor address; City; State; Zip Code Charlestown, MA 02129	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Tapestry Networks
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Robin <hr/> Contributor address; City; State; Zip Code Hudson, WI 54016	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/267 Rpt: 202/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenblum, Holly <hr/> 6 Contributor address; City; State; Zip Code Walnut Creek, CA 94598	7 Amount of Contribution (\$) \$1.87
8 Principal occupation / Job title (See Instructions) Biologist		9 Employer (See Instructions) California Academy of sciences
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenblum, Holly <hr/> Contributor address; City; State; Zip Code Walnut Creek, CA 94598	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) California Academy of sciences
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosner, Mark <hr/> Contributor address; City; State; Zip Code LA, CA 90068	Amount of Contribution (\$) \$142.86
Principal occupation / Job title (See Instructions) Screenwriter		Employer (See Instructions) Bridge & Tunnel Ent.
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Mark <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15212	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothman, Patricia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/267 Rpt: 203/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> 6 Contributor address; City; State; Zip Code Zanesville, OH 43701	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) School Age Literacy Specialist		9 Employer (See Instructions) Muskingum County Library System
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> Contributor address; City; State; Zip Code Zanesville, OH 43701	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> Contributor address; City; State; Zip Code Zanesville, OH 43701	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudberg, Leo <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Google LLC
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114	Amount of Contribution (\$) \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/267 Rpt: 204/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> 6 Contributor address; City; State; Zip Code APO, AE 09114	7 Amount of Contribution (\$) \$2.77
8 Principal occupation / Job title (See Instructions) 12A		9 Employer (See Instructions) US Army
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Cynthia <hr/> Contributor address; City; State; Zip Code clinton township, MI 48038	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Exec Asst		Employer (See Instructions) General Motors
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Dave <hr/> Contributor address; City; State; Zip Code Sparta, NC 28675	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/267 Rpt: 205/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 02/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> 6 Contributor address; City; State; Zip Code Brightwood, OR 97011	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/267 Rpt: 206/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> 6 Contributor address; City; State; Zip Code Brightwood, OR 97011	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/267 Rpt: 207/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CARI	7 Amount of Contribution (\$) \$2.78
6 Contributor address; City; State; Zip Code Los Angeles, CA 90004		
8 Principal occupation / Job title (See Instructions) Publicist		9 Employer (See Instructions) The Angellotti Co
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saffer, Abraham	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Silver Spring, MD 20910		
Principal occupation / Job title (See Instructions) Policy		Employer (See Instructions) American Occupational Therapy Association
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Jonathan	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Brooklyn, NY 11226		
Principal occupation / Job title (See Instructions) Artist/Educator		Employer (See Instructions) Self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Richard	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Jenkintown, PA 19046		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/267 Rpt: 208/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) AWS
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santiago-Torres, Francisco <hr/> Contributor address; City; State; Zip Code Temple Terrace, FL 33637	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) U.S. Army
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Product Strategy Manager		Employer (See Instructions) Texas Instruments
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saunby, Shirene <hr/> Contributor address; City; State; Zip Code ANTELOPE, CA 95843	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) VA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/267 Rpt: 209/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savitz, Bobbie <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97215	7 Amount of Contribution (\$) \$2.02
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/267 Rpt: 210/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schapiro, Lori <hr/> 6 Contributor address; City; State; Zip Code Vestal, NY 13850	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Coughlin & Gerhart
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/267 Rpt: 211/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> 6 Contributor address; City; State; Zip Code Kent, OH 44240	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoenholtz, Ari <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55407	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/267 Rpt: 212/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, William <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90035	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) actor		9 Employer (See Instructions) Entertainment Partners
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Tal <hr/> Contributor address; City; State; Zip Code Stanford, CA 94305	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Stanford University
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/267 Rpt: 213/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoufos, Jeannette <hr/> 6 Contributor address; City; State; Zip Code Anthem, AZ 85086	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoufos, Jeannette <hr/> Contributor address; City; State; Zip Code Anthem, AZ 85086	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selby, Jennifer <hr/> Contributor address; City; State; Zip Code San Bruno, TX 94066	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Blue River Technology
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sell, Jaedon <hr/> Contributor address; City; State; Zip Code Dublin, OH 43016	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Customer Service Manager		Employer (See Instructions) Wagmo Inc.
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senger, Carolyn <hr/> Contributor address; City; State; Zip Code San Mateo, CA 94403	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) XO

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/267 Rpt: 214/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serda, Shirla <hr/> 6 Contributor address; City; State; Zip Code Mesa, AZ 85208	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Mortgage Servicing		9 Employer (See Instructions) NewRez
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Tarik <hr/> Contributor address; City; State; Zip Code New York, NY 11238	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Schulte Roth & Zabel
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapira, Andrew <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) City of Newton
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapira, Andrew <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) City of Newton
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Sandra <hr/> Contributor address; City; State; Zip Code Brookline, MA 02445	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/267 Rpt: 215/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, William <hr/> 6 Contributor address; City; State; Zip Code Indianapolis, IN 46260	7 Amount of Contribution (\$) \$14.29
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherburne, David <hr/> Contributor address; City; State; Zip Code Burbank, CA 91506	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Fox Animation
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Julie <hr/> Contributor address; City; State; Zip Code Portland, OR 97217	Amount of Contribution (\$) \$71.43
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Wildlife Impact
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shumer, Lara D <hr/> Contributor address; City; State; Zip Code Napa, CA 94558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sonoma Valley Unified

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/267 Rpt: 216/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sikorski, Melissa <hr/> 6 Contributor address; City; State; Zip Code Orlando, FL 32803	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silpakit, Naris <hr/> Contributor address; City; State; Zip Code Tukwila, WA 98168	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon Web Services
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Mira <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) College Consultant		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/267 Rpt: 217/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Carrie <hr/> 6 Contributor address; City; State; Zip Code GREENSBORO, TX 27408-6820	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Graphic designer		9 Employer (See Instructions) Carrie Hughes
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sirur, Namrata <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Video Marketer		Employer (See Instructions) MisFit Communications LLC
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skilton, Sarah <hr/> Contributor address; City; State; Zip Code Valencia, CA 91355	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skipper, Katherine <hr/> Contributor address; City; State; Zip Code APO, AP 96326	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sklarr, Joelle W <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07302	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Citi

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/267 Rpt: 218/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slotkoff, Dan <hr/> 6 Contributor address; City; State; Zip Code Doylestown, PA 18901	7 Amount of Contribution (\$) \$31.25
8 Principal occupation / Job title (See Instructions) Computer Engineer		9 Employer (See Instructions) Oracle USA
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slover, Ashleigh <hr/> Contributor address; City; State; Zip Code Independence, MO 64055	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ewing Marion Kauffman School
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slover, Ashleigh <hr/> Contributor address; City; State; Zip Code Independence, MO 64055	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ewing Marion Kauffman School
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Alec <hr/> Contributor address; City; State; Zip Code Nashville, TN 37216	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Evan <hr/> Contributor address; City; State; Zip Code Oakland, CA 94610	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Titan

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/267 Rpt: 219/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley 6 Contributor address; City; State; Zip Code Indianapolis, IN 46202	7 Amount of Contribution (\$) \$2.09
8 Principal occupation / Job title (See Instructions) Advertising		9 Employer (See Instructions) Digitas
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Joanne Contributor address; City; State; Zip Code OAK PARK, IL 60302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) ServiceNow
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sara Contributor address; City; State; Zip Code Hillsboro, VA 20132	Amount of Contribution (\$) \$7.15
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) INNER QUEST Inc
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zachary Contributor address; City; State; Zip Code Veazie, ME 04401	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Northern Light
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Robert Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46220-1633	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) LifeOmic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/267 Rpt: 220/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> 6 Contributor address; City; State; Zip Code Starkville, MS 39759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Grad Student		9 Employer (See Instructions) Northwestern University
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soffer, Oren <hr/> Contributor address; City; State; Zip Code Glendale, CA 91204	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Freelance Cinematographer		Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Space, Susan <hr/> Contributor address; City; State; Zip Code Newcastle, CA 95658	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spector, Steven <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94109	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speigle, Rachel <hr/> Contributor address; City; State; Zip Code Boston, MA 02118	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) SFP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/267 Rpt: 221/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sperber, Anna <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11232	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) choreographer/ performing artist		9 Employer (See Instructions) freelance
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spivack, Emily <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Operations Associate		Employer (See Instructions) Forward
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stahl, Katherine <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starr, Christa <hr/> Contributor address; City; State; Zip Code Studio City, CA 91602	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Cheek full of nuts Inc
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/267 Rpt: 222/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedman, Barbara	7 Amount of Contribution (\$) \$3.13
6 Contributor address; City; State; Zip Code Portland, OR 97239		
8 Principal occupation / Job title (See Instructions) Research Administrator		9 Employer (See Instructions) Portland State University
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Richard D.	Amount of Contribution (\$) \$7.15
Contributor address; City; State; Zip Code Spokane, WA 99203		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Lingraphica
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Richard D.	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Spokane, WA 99203		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Lingraphica
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steen, Adina	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code Boston, MA 02215		
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Massachusetts General Hospital
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, James	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Rancho Cordova, CA 95742		
Principal occupation / Job title (See Instructions) Foreign Service		Employer (See Instructions) USAID

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/267 Rpt: 223/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stekler, Beth	7 Amount of Contribution (\$) \$7.14
6 Contributor address; City; State; Zip Code Washington, DC 20016-2064		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stekler, Beth	Amount of Contribution (\$) \$7.14
Contributor address; City; State; Zip Code Washington, DC 20016-2064		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stekler, Beth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Washington, DC 20016-2064		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stekler, Beth	Amount of Contribution (\$) \$7.14
Contributor address; City; State; Zip Code Washington, DC 20016-2064		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stern, Judith	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Los Angeles, CA 90064		
Principal occupation / Job title (See Instructions) Legal Administrator		Employer (See Instructions) Spiro Moss LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/267 Rpt: 224/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Edward <hr/> 6 Contributor address; City; State; Zip Code Paoli, PA 19301	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/267 Rpt: 225/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew <hr/> 6 Contributor address; City; State; Zip Code Pullman, WA 99163	7 Amount of Contribution (\$) \$2.09
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Mary A <hr/> Contributor address; City; State; Zip Code Richmond, CA 94805	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acupuncturist		Employer (See Instructions) Berkeley Acupuncture Project
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Sarah <hr/> Contributor address; City; State; Zip Code Watertown, ME 02472	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) clinical psychologist		Employer (See Instructions) self
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> Contributor address; City; State; Zip Code Marana, AZ 85658	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> Contributor address; City; State; Zip Code Marana, AZ 85658	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/267 Rpt: 226/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> 6 Contributor address; City; State; Zip Code Marana, AZ 85658	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Craig <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95403	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) CRPUSD
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stough, Emily <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jet Propulsion Laboratory
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Amy <hr/> Contributor address; City; State; Zip Code Ridgewood, NY 11385	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Research Manager		Employer (See Instructions) Red Lantern Strategy
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Branch <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Director of Finance		Employer (See Instructions) NYC Emergency Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/267 Rpt: 227/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Branch <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	7 Amount of Contribution (\$) \$11.11
8 Principal occupation / Job title (See Instructions) Director of Finance		9 Employer (See Instructions) NYC Emergency Management
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suski, Lois <hr/> Contributor address; City; State; Zip Code Cusick, WA 99119	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Analisa <hr/> Contributor address; City; State; Zip Code Burbank, CA 91504	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ford & Wallach

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/267 Rpt: 228/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Analisa <hr/> 6 Contributor address; City; State; Zip Code Burbank, CA 91504	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Ford & Wallach
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Eileen <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Eileen <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Eileen <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Joseph <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/267 Rpt: 229/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 02/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Joseph <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swindle, Renee <hr/> Contributor address; City; State; Zip Code Oakland, CA 94608	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Writer
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szymanski, Cindi <hr/> Contributor address; City; State; Zip Code North Royalton, OH 44133	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Brand Manager		Employer (See Instructions) Playhouse Square
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON-AMATO, NATHAN <hr/> Contributor address; City; State; Zip Code El Dorado Hills, CA 95762	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) DSG Inc.
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/267 Rpt: 230/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> 6 Contributor address; City; State; Zip Code Kirkland, WA 98034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Learning Project Manager		9 Employer (See Instructions) Boeing
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarnar, Kim <hr/> Contributor address; City; State; Zip Code South Pasadena, CA 91030	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Print production		Employer (See Instructions) Disney
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatman, Brett <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Corp sustainability		Employer (See Instructions) Zurich
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thew, Andrea <hr/> Contributor address; City; State; Zip Code Gulfport, FL 33707	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Registered nurse		Employer (See Instructions) UVM medical center
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thiel, Evelyn <hr/> Contributor address; City; State; Zip Code St. Louis, MT 63128	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/267 Rpt: 231/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Brita <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions) Credit Karma
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Denis <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) University of Texas at Austin
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Susan <hr/> Contributor address; City; State; Zip Code Fishkill, NY 12524	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/267 Rpt: 232/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Susan <hr/> 6 Contributor address; City; State; Zip Code Fishkill, NY 12524	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Susan <hr/> Contributor address; City; State; Zip Code Fishkill, NY 12524	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Susan <hr/> Contributor address; City; State; Zip Code Fishkill, NY 12524	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Susan <hr/> Contributor address; City; State; Zip Code Fishkill, NY 12524	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thronkson, Joe <hr/> Contributor address; City; State; Zip Code Seattle, WA 98122	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Zillow Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/267 Rpt: 233/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> 6 Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton-Jones, Carrie <hr/> Contributor address; City; State; Zip Code Portland, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) student writer		Employer (See Instructions) self
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/267 Rpt: 234/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> 6 Contributor address; City; State; Zip Code Plymouth, MI 48170	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Ford Motor Company
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tittermary, Nicole <hr/> Contributor address; City; State; Zip Code Sunbury, OH 43074	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pharmacy
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobey, Garson <hr/> Contributor address; City; State; Zip Code Davie, FL 33324	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Computer Consultant		Employer (See Instructions) Self
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/267 Rpt: 235/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torson, Adam <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90019	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Marlborough School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/267 Rpt: 236/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Reading, MA 01867	7 Amount of Contribution (\$) \$1.66
8 Principal occupation / Job title (See Instructions) Scientist		9 Employer (See Instructions) Kronos Bio
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867	Amount of Contribution (\$) \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Kenneth <hr/> Contributor address; City; State; Zip Code Ledyard, CT 06339	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) University of Connecticut
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Kenneth <hr/> Contributor address; City; State; Zip Code Ledyard, CT 06339	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) University of Connecticut
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trathen, Sally <hr/> Contributor address; City; State; Zip Code Orangevale, CA 95662	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/267 Rpt: 237/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trathen, Sally <hr/> 6 Contributor address; City; State; Zip Code Orangevale, CA 95662	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trathen, Sally <hr/> Contributor address; City; State; Zip Code Orangevale, CA 95662	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/267 Rpt: 238/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tronrud, Josh	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code West Jordan, UT 84081		
8 Principal occupation / Job title (See Instructions) Manufacturing		9 Employer (See Instructions) Ina's Workshop LLC
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tronrud, Josh	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code West Jordan, UT 84081		
Principal occupation / Job title (See Instructions) Production Assitant		Employer (See Instructions) Ina's Workshop LLC
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin	Amount of Contribution (\$) \$2.77
Contributor address; City; State; Zip Code Redwood valley, CA 95470		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin	Amount of Contribution (\$) \$2.77
Contributor address; City; State; Zip Code Redwood valley, CA 95470		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Kalaheo, HI 96741		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/267 Rpt: 239/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> 6 Contributor address; City; State; Zip Code Kalaheo, HI 96741	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Wendy <hr/> Contributor address; City; State; Zip Code Toluca Lake, CA 91602	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullock, Mary <hr/> Contributor address; City; State; Zip Code Rohnert Park, CA 94928	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) classroom coordinator		Employer (See Instructions) ANOVA
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullock, Mary <hr/> Contributor address; City; State; Zip Code Rohnert Park, CA 94928	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) classroom coordinator		Employer (See Instructions) ANOVA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/267 Rpt: 240/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tweedy, David <hr/> 6 Contributor address; City; State; Zip Code Woodham KT153PX United Kingdom	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Head of mortgages		9 Employer (See Instructions) heylo housing
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underwood, Adriane <hr/> Contributor address; City; State; Zip Code St Louis, MO 63132-4418	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ursin, Marya <hr/> Contributor address; City; State; Zip Code stonington, CT 06378	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) performer
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vahedi, Mina <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) MA Public Schools
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vahedi, Mina <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) MA Public Schools

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/267 Rpt: 241/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Falls Church, VA 22043		
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Marriott
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Falls Church, VA 22043		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Falls Church, VA 22043		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Valkinburgh, Terri	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Chicago, IL 60643		
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Lyric Opera of Chicago
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHouten, Holly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77098		
Principal occupation / Job title (See Instructions) Scholar Relations Manager		Employer (See Instructions) The Terry Foundation

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/267 Rpt: 242/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderpoel, sarah <hr/> 6 Contributor address; City; State; Zip Code Beaverton, OR 97006	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) admin assistant		9 Employer (See Instructions) pcc
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varney, Scott <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared <hr/> Contributor address; City; State; Zip Code Addis, LA 70710	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared <hr/> Contributor address; City; State; Zip Code Addis, LA 70710	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Venus, Delisia <hr/> Contributor address; City; State; Zip Code St Paul, MN 55116	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) U.S. Bank

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/267 Rpt: 243/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vignale, James <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89052	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Auctioneer/Trustee Sales Coordinator		9 Employer (See Instructions) Nevada Legal Support Services
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vimont, Terry <hr/> Contributor address; City; State; Zip Code Pine, CO 80470	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Cherokee Nation Technologies
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Cheryl <hr/> Contributor address; City; State; Zip Code Port Huron, MI 48060	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) State of Michigan		Employer (See Instructions) Data Analyst
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, TX 92126	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, TX 92126	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/267 Rpt: 244/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> 6 Contributor address; City; State; Zip Code San Diego, TX 92126	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) General Atomics
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volkman, Laurie <hr/> Contributor address; City; State; Zip Code Sullivan's Island, SC 29482	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CofC
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorsanger, Susan <hr/> Contributor address; City; State; Zip Code Ossining, NY 10562	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Mount Saint Mary College
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70130	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Levelset
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70130	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Levelset

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/267 Rpt: 245/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waguespack, Eric	7 Amount of Contribution (\$) \$1.25
6 Contributor address; City; State; Zip Code New Orleans, LA 70130		
8 Principal occupation / Job title (See Instructions) Salesperson		9 Employer (See Instructions) Levelset
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainwright, Colleen	Amount of Contribution (\$) \$35.71
Contributor address; City; State; Zip Code Los Angeles, CA 90005		
Principal occupation / Job title (See Instructions) Director Risk Mgmt		Employer (See Instructions) CASHet
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa	Amount of Contribution (\$) \$2.14
Contributor address; City; State; Zip Code Rochester, MN 55901		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa	Amount of Contribution (\$) \$2.14
Contributor address; City; State; Zip Code Rochester, MN 55901		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa	Amount of Contribution (\$) \$2.14
Contributor address; City; State; Zip Code Rochester, MN 55901		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/267 Rpt: 246/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Rylan <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97330	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Assistant Director		9 Employer (See Instructions) Oregon State University
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Rylan <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Rylan <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Chad <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NLRB
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Matt <hr/> Contributor address; City; State; Zip Code Newark, DE 19702	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) IT Security		Employer (See Instructions) Target

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/267 Rpt: 247/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wally, Liz <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) self
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wally, Liz <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Kenn <hr/> Contributor address; City; State; Zip Code Portland, OR 97209	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/267 Rpt: 248/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> 6 Contributor address; City; State; Zip Code Greenville, SC 29605	7 Amount of Contribution (\$) \$1.88
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Freelance
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Linda <hr/> Contributor address; City; State; Zip Code Pleasant Hill, CA 94523	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Asst Business Mgr		Employer (See Instructions) Flatiron West Inc
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Mignon <hr/> Contributor address; City; State; Zip Code Inglewood, CA 90305	Amount of Contribution (\$) \$2.53
Principal occupation / Job title (See Instructions) Civil Servant		Employer (See Instructions) City of Los Angeles
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> Contributor address; City; State; Zip Code Milwaukie, OR 97222	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> Contributor address; City; State; Zip Code Milwaukie, OR 97222	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/267 Rpt: 249/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> 6 Contributor address; City; State; Zip Code Milwaukie, OR 97222	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Laura <hr/> Contributor address; City; State; Zip Code Fort Lauderdale, FL 33308	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Laura Weiner CPA
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welter, Mary Jane <hr/> Contributor address; City; State; Zip Code River Forest, IL 60305	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Christine <hr/> Contributor address; City; State; Zip Code Arvada, CO 80003	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Ecommerce manager		Employer (See Instructions) Brilliant Earth
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/267 Rpt: 250/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92103	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wetzel, Nadine <hr/> Contributor address; City; State; Zip Code East Aurora, NY 14052	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Erie County DEP/DSM
Date 01/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/267 Rpt: 251/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/267 Rpt: 252/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Barbara <hr/> 6 Contributor address; City; State; Zip Code Cohoes, NY 12047	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) editor		9 Employer (See Instructions) Paulist Fathers
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteman, Nathan <hr/> Contributor address; City; State; Zip Code Highland Park, TX 60035	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Stout
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/267 Rpt: 253/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94602	7 Amount of Contribution (\$) \$1.75
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85224	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Susan <hr/> Contributor address; City; State; Zip Code Fort Bragg, CA 95437	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) CVIS
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilton, Bruce <hr/> Contributor address; City; State; Zip Code Gilbert, AZ 85233	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) airline pilot		Employer (See Instructions) Alaska Airlines

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/267 Rpt: 254/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winston, Jaron <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) Sash
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Katie <hr/> Contributor address; City; State; Zip Code Ann arbor, MI 48104	Amount of Contribution (\$) \$14.28
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ann Arbor public schools
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/267 Rpt: 255/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10027	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code San Francisco, TX 94131	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code San Francisco, TX 94131	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code San Francisco, TX 94131	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/267 Rpt: 256/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Tansy <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92102	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Cozen O'Connor
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Valerie <hr/> Contributor address; City; State; Zip Code River Forest, IL 60305	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yacovoni, Nina <hr/> Contributor address; City; State; Zip Code Chicago, IL 60613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Managing Consultant		Employer (See Instructions) Guidehouse
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagerline, John <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22033	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ankura Consulting
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagerline, John <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22033	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ankura Consulting

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/267 Rpt: 257/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce <hr/> 6 Contributor address; City; State; Zip Code Rocklin, CA 95765	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Cubizm
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce <hr/> Contributor address; City; State; Zip Code Rocklin, CA 95765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/267 Rpt: 258/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yilmaz, Aykut <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20002	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) Manager Certification		9 Employer (See Instructions) AHRI
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Stephen <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28273	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Sales Engineer		Employer (See Instructions) SonicAire
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Stephen <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28273	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) SonicAire

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/267 Rpt: 259/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Jermaine <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$7.15
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) Jermaine
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu Stipkovits, Marie <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55407	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zalewski, Kenneth <hr/> Contributor address; City; State; Zip Code Richmond HTS, OH 44143	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Thermo
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zalewski, Kenneth <hr/> Contributor address; City; State; Zip Code Richmond HTS, OH 44143	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Thermo
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Emilio <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/267 Rpt: 260/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeck, Leanne <hr/> 6 Contributor address; City; State; Zip Code Bath, NY 14810	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) pastor		9 Employer (See Instructions) UMC
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zerwick, Susan <hr/> Contributor address; City; State; Zip Code Cazadero, CA 95421	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji <hr/> Contributor address; City; State; Zip Code Olivebridge, NY 12461	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji <hr/> Contributor address; City; State; Zip Code Olivebridge, NY 12461	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji <hr/> Contributor address; City; State; Zip Code Olivebridge, NY 12461	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/267 Rpt: 261/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zlotoff, Daniel	7 Amount of Contribution (\$) \$1.14
6 Contributor address; City; State; Zip Code Fremont, CA 94538		
8 Principal occupation / Job title (See Instructions) Advertising		9 Employer (See Instructions) Reddit
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zlotoff, Daniel	Amount of Contribution (\$) \$1.14
Contributor address; City; State; Zip Code Fremont, CA 94538		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Reddit
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zlotoff, Daniel	Amount of Contribution (\$) \$1.14
Contributor address; City; State; Zip Code Fremont, CA 94538		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Reddit
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zobrist, Lesley	Amount of Contribution (\$) \$2.08
Contributor address; City; State; Zip Code Shoreline, WA 98133		
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) alessi, john	Amount of Contribution (\$) \$1.87
Contributor address; City; State; Zip Code Glens Falls, NY 12801		
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions) HCR Homecare

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/267 Rpt: 262/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) arredondo, caryn <hr/> 6 Contributor address; City; State; Zip Code San francisco, CA 94107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) designer		9 Employer (See Instructions) market research firm
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) arus, pablo <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) assistant property manager		Employer (See Instructions) kw property management
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) arus, pablo <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) assistant property manager		Employer (See Instructions) kw property management
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) arus, pablo <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) assistant property manager		Employer (See Instructions) kw property management
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ayala, christina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90045	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) AR/AP Payroll		Employer (See Instructions) Anachem Laboaratories

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/267 Rpt: 263/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) barilotti, steve <hr/> 6 Contributor address; City; State; Zip Code Cardiff, CA 92007	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) boggs, Chris <hr/> Contributor address; City; State; Zip Code Indianapolis, IN 46220	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Ernst & Young LLP
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) cotton, mitzi <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) City of Austin
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) eitman, christine <hr/> Contributor address; City; State; Zip Code Akron, OH 44320	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Stark county children services
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) finney, julianna <hr/> Contributor address; City; State; Zip Code Aptos, CA 95003-5257	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Mail carrier		Employer (See Instructions) USPS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/267 Rpt: 264/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fitzharris, barbara <hr/> 6 Contributor address; City; State; Zip Code GUERNVILLE, CA 95446	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fortin, renee <hr/> Contributor address; City; State; Zip Code Riverside, CA 92506	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Associate Government Program Analyst		Employer (See Instructions) State of California
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fortin, renee <hr/> Contributor address; City; State; Zip Code Riverside, CA 92506	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Associate Government Program Analyst		Employer (See Instructions) State of California
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hoekstra, deanne <hr/> Contributor address; City; State; Zip Code West Sacramento, CA 95691	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hutchins, marlene <hr/> Contributor address; City; State; Zip Code missoula, MT 59802	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) art director		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/267 Rpt: 265/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hutchins, marlene <hr/> 6 Contributor address; City; State; Zip Code missoula, MT 59802	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) art director		9 Employer (See Instructions) self
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, debra <hr/> Contributor address; City; State; Zip Code Houston, TX 77061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) keller, eileen <hr/> Contributor address; City; State; Zip Code TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO Media Buying Service		Employer (See Instructions) ideality.com inc.
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kothari, devora <hr/> Contributor address; City; State; Zip Code san carlos, CA 94070	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) n/a		Employer (See Instructions) n/a
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) leckert, oriana <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/267 Rpt: 266/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) leckert, oriana <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) editor		9 Employer (See Instructions) self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) loeb, page <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/267 Rpt: 267/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lowen, kelly <hr/> 6 Contributor address; City; State; Zip Code nashville, TN 37209	7 Amount of Contribution (\$) \$14.28
8 Principal occupation / Job title (See Instructions) clinical trials		9 Employer (See Instructions) vanderbilt university
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/267 Rpt: 268/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mueller, joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) offitzer, adam <hr/> Contributor address; City; State; Zip Code cambridge, MA 02138	Amount of Contribution (\$) \$35.72
Principal occupation / Job title (See Instructions) Content Manager		Employer (See Instructions) Spotify
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) pecorini, Steven <hr/> Contributor address; City; State; Zip Code floral park, NY 11001	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) r wouk, kari <hr/> Contributor address; City; State; Zip Code Durham, NC 27704	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) Informal Educator		Employer (See Instructions) State of NC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/267 Rpt: 269/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) stoddart, gwynne <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) tague, harold <hr/> Contributor address; City; State; Zip Code Pacific Grove, CA 93950	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) IT Specialist		Employer (See Instructions) DoD
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) treimanis, christine <hr/> Contributor address; City; State; Zip Code Hamburg, NY 14075	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) treimanis, christine <hr/> Contributor address; City; State; Zip Code Hamburg, NY 14075	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam <hr/> Contributor address; City; State; Zip Code New Jersey, NJ 07302	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/267 Rpt: 270/308
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam <hr/> 6 Contributor address; City; State; Zip Code New Jersey, NJ 07302	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Deloitte
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam <hr/> Contributor address; City; State; Zip Code New Jersey, NJ 07302	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310	Amount of Contribution (\$) \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) young, Kellyn <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White

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
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: Sch: 1/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/20/2023	5 Payee name Adobe	
6 Amount (\$) \$22.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2023	Candidate/Officeholder name Adobe	
Amount (\$) \$22.30 <input type="checkbox"/> Expenditure from corporate funds	Office sought 345 Park Avenue San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/22/2023	Candidate/Officeholder name Adobe	
Amount (\$) \$22.30 <input type="checkbox"/> Expenditure from corporate funds	Office sought 345 Park Avenue San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete <u>ONLY</u> if direct 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
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: Sch: 2/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/03/2023	5 Payee name Adobe	
6 Amount (\$) \$58.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2023	Payee name Adobe	
Amount (\$) \$58.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2023	Payee name Adobe	
Amount (\$) \$58.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 3/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/26/2023	5 Payee name Adobe	
6 Amount (\$) \$24.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2023	Payee name Aguas Frescas	
Amount (\$) \$16.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1475 Sugar Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2023	Payee name Amazon	
Amount (\$) \$16.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 4/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/17/2023	5 Payee name Amazon	
6 Amount (\$) \$76.54 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2023	Payee name Amazon	
Amount (\$) \$108.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2023	Payee name Brandboosters	
Amount (\$) \$421.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print costs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 5/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 04/17/2023	5 Payee name Campano, Adriana
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6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code San Juan, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Circle K
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Amount (\$) \$17.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel, Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/07/2023	Payee name Circle K
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Amount (\$) \$14.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 6/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 04/14/2023	5 Payee name Circle K
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6 Amount (\$) \$14.89	7 Payee address; City; State; Zip Code 2204 W. Trenton Edinburg, TX 78539
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/20/2023	Payee name Circle K
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Amount (\$) \$17.96	Payee address; City; State; Zip Code 2204 W. Trenton Edinburg, TX 78539
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel, Supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/06/2023	Payee name ConstantContact
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Amount (\$) \$638.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 7/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/07/2023	5 Payee name ConstantContact	
6 Amount (\$) \$496.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2023	Payee name ConstantContact	
Amount (\$) \$101.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2023	Payee name ConstantContact	
Amount (\$) \$138.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 8/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/12/2023	5 Payee name ConstantContact	
6 Amount (\$) \$138.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2023	Payee name ConstantContact	
Amount (\$) \$132.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2023	Payee name Cricket	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1025 Lenox Park Atlanta, GA 30319	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 9/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 04/24/2023	5 Payee name Dollar General
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6 Amount (\$) \$45.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1311 W Owassa Rd TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/12/2023	Payee name Domit Executive Business Center
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Amount (\$) \$960.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2023	Payee name Domit Executive Business Center
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Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 10/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/30/2023	5 Payee name East Ocean Cafe	
6 Amount (\$) \$30.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Edinburg, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2023	Payee name Google Gsuite	
Amount (\$) \$12.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/24/2023	Payee name Google	
Amount (\$) \$12.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 11/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/06/2023	5 Payee name HTTPSOTTER	
6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/21/2023	Payee name HTTPSOTTER	
Amount (\$) \$55.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/05/2023	Payee name HTTPSOTTER	
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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
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: Sch: 12/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/05/2023	5 Payee name HTTPSOTTER	
6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2023	Payee name HTTPSOTTER	
Amount (\$) \$10.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2023	Payee name Happy Scribe	
Amount (\$) \$19.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 13/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/06/2023	5 Payee name Hustle	
6 Amount (\$) \$1,298.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2023	Payee name Hustle	
Amount (\$) \$99.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2023	Payee name Hustle	
Amount (\$) \$209.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 14/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/09/2023	5 Payee name Hustle	
6 Amount (\$) \$2,341.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2023	Payee name Hustle	
Amount (\$) \$1,100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/12/2023	Payee name Le Lai	
Amount (\$) \$44.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code McAllen, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 15/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 05/15/2023	5 Payee name Leeland House
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6 Amount (\$) \$30.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/28/2023	Payee name Lone Star National Bank
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Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/31/2023	Payee name Lone Star National Bank
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Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 16/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/28/2023	5 Payee name Lone Star National Bank	
6 Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/08/2023	Candidate/Officeholder name Lone Star National Bank	
Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Office sought 600 E Nolana Ave MCALLEN, TX 78504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/31/2023	Candidate/Officeholder name Lone Star National Bank	
Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Office sought 600 E Nolana Ave MCALLEN, TX 78504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Office held		
Complete <u>ONLY</u> if direct 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
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: Sch: 17/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 06/30/2023	5 Payee name Lone Star National Bank	
6 Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/26/2023	Candidate/Officeholder name Payee name Lucky Sushi	
Amount (\$) \$66.16 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2023	Candidate/Officeholder name Payee name Mega.NZ	
Amount (\$) \$5.47 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete <u>ONLY</u> if direct 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
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: Sch: 18/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 02/07/2023	5 Payee name Mega.NZ	
6 Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2023	Payee name Mega.NZ	
Amount (\$) \$5.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name Mega.NZ	
Amount (\$) \$5.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 19/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 05/08/2023	5 Payee name Mega.NZ
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6 Amount (\$) \$5.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2023	Payee name Mega.NZ
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Amount (\$) \$5.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2 Wellsford Auckland 0972 New Zealand
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/18/2023	Payee name Moonlight Cafe
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Amount (\$) \$29.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 20/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/07/2023	5 Payee name NGP Van	
6 Amount (\$) \$445.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2023	Payee name PIZZA HUT	
Amount (\$) \$52.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1802 S Closner Blvd Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2023	Payee name Planable	
Amount (\$) \$52.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 21/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/09/2023	5 Payee name Planable	
6 Amount (\$) \$52.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/17/2023	Payee name Planable	
Amount (\$) \$52.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/09/2023	Payee name Planable	
Amount (\$) \$52.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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
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: Sch: 22/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 01/17/2023	5 Payee name Prado, Abel
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6 Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2522 King Drive Donna, TX 78537
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Reimburse
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/03/2023	Payee name Public Research Group
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Amount (\$) \$800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build The Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operating & Recruitment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2023	Payee name Public Research Group
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Amount (\$) \$190.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Furniture
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 23/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 03/17/2023	5 Payee name Public Research Group	
6 Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Reimburse
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2023	Payee name Public Research Group	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operation & Recruitment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name Public Research Group	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Build Bench Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 24/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/11/2023	5 Payee name Public Research Group	
6 Amount (\$) \$265.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operation, Recruitment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name Public Research Group	
Amount (\$) \$165.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name Public Research Group	
Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 25/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/26/2023	5 Payee name Public Research Group	
6 Amount (\$) \$84.50	7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
<input type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2023	Payee name Public Research Group	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2023	Payee name Public Research Group	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 26/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 05/09/2023	5 Payee name Public Research Group
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/17/2023	Payee name Public Research Group
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Amount (\$) \$320.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/31/2023	Payee name Public Research Group
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Amount (\$) \$1,380.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 27/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 06/09/2023	5 Payee name Public Research Group
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6 Amount (\$) \$744.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/20/2023	Payee name Public Research Group
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Amount (\$) \$515.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Build the Bench	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Operations, Recruitment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/24/2023	Payee name Riddle , Chelsie
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Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Luling, TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Alivianada Fund Grantee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 28/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 04/24/2023	5 Payee name Spectrum
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6 Amount (\$) \$125.51 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2023	Payee name Spectrum
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Amount (\$) \$58.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/27/2023	Payee name Stripes
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Amount (\$) \$3.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4218 S. McColl McAllen, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverage Expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 29/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/03/2023	5 Payee name Sunoco	
6 Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2100 W Trenton Rd Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/06/2023	Payee name Sunoco	
Amount (\$) \$38.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 W Trenton Rd Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2023	Payee name Sunoco	
Amount (\$) \$23.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 W Trenton Rd Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel & Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 30/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/27/2023	5 Payee name Sunoco	
6 Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2100 W Trenton Rd Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/18/2023	Payee name Sunoco	
Amount (\$) \$75.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 W Trenton Rd Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel, Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Tucker, Jobie	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Austin, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Focus Group Participation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 31/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 02/07/2023	5 Payee name Wal Mart	
6 Amount (\$) \$26.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name Wal Mart	
Amount (\$) \$18.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name Wal Mart	
Amount (\$) \$36.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 32/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 05/16/2023	5 Payee name Wal Mart	
6 Amount (\$) \$36.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2023	Payee name Wal Mart	
Amount (\$) \$12.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverage Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2023	Payee name Wal Mart	
Amount (\$) \$35.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 33/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 05/10/2023	5 Payee name Wendys
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6 Amount (\$) \$8.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/21/2023	Payee name Whataburger
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Amount (\$) \$36.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 300 Concord Plaza Dr San Antonio, TX 78216
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/17/2023	Payee name Wix.Com
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Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 34/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/23/2023	5 Payee name Wix.Com	
6 Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Wix.Com	
Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2023	Payee name Wix.Com	
Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 35/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 03/07/2023	5 Payee name Wix.Com
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6 Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/17/2023	Payee name Wix.Com
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Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Wix.Com
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Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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: Sch: 36/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 04/24/2023	5 Payee name Wix.Com	
6 Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2023	Payee name Wix.Com	
Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2023	Payee name Wix.Com	
Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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: Sch: 37/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
4 Date 01/10/2023	5 Payee name Zoom	
6 Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/10/2023	Payee name Zoom	
Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/10/2023	Payee name Zoom	
Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 38/38 Rpt:	2 FILER NAME Cambio Texas PAC	3 Filer ID (Ethics Commission Filers) 00082985
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4 Date 04/10/2023	5 Payee name Zoom
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6 Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/10/2023	Payee name Zoom
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Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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