

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) 00085309	2 Total pages filed: 44
3 COMMITTEE NAME The 134 Political Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/17/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 357 Mineral Wells, TX 76068	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Carla S.		
	NICKNAME LAST SUFFIX Porter		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 875 State Hwy 4 Palo Pinto, TX 76484		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 293 Palo Pinto, TX 76484		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (940) 329-0514		
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 The 134 Political Action Committee	13 Filer ID (Ethics Commission Filers) 00085309
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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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,183.40
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,018.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,871.08
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.

Mrs. Carla S. Porter

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
3 of 44

17 COMMITTEE NAME The 134 Political Action Committee		18 Filer ID 00085309	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	8,183.40
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	\$	1,018.98
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: 1/33 Rpt: 4/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Jack (CEO) <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79701	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Navigator Oil
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, David <hr/> Contributor address; City; State; Zip Code Dublin, TX 76446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Rose <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzon, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzon, TX 76941	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: 2/33 Rpt: 5/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 03/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Mertzon, TX 76941		
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#: _____) Cravens, Richie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mertzon, TX 76941		
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#: _____) Cravens, Richie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mertzon, TX 76941		
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#: _____) Cravens, Richie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mertzon, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
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: 3/33 Rpt: 6/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Kyle, TX 78640		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
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: 4/33 Rpt: 7/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Sr. Copywriter		9 Employer (See Instructions) TMP
Date 01/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP
Date 01/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/33 Rpt: 8/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79407	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) GibsonFirm
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/33 Rpt: 9/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79407		
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) GibsonFirm
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/33 Rpt: 10/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> 6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Self Employed
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		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: 8/33 Rpt: 11/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> 6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Self Employed
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe <hr/> Contributor address; City; State; Zip Code Boyd, TX 76023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 02/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/33 Rpt: 12/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77252	
8 Principal occupation / Job title (See Instructions) assistant director		9 Employer (See Instructions) University of Texas Houston
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77252	
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77252	
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, John	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Meridian, TX 76665	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) John Hastings
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob	Amount of Contribution (\$) \$13.40
	Contributor address; City; State; Zip Code San Antonio, TX 78254	
Principal occupation / Job title (See Instructions) Media & Communications Specialist		Employer (See Instructions) Great Northwest Community Improvement Assoc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/33 Rpt: 13/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Weatherford, TX 76085		
8 Principal occupation / Job title (See Instructions) writer/designer		9 Employer (See Instructions) self
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Weatherford, TX 76085		
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Weatherford, TX 76085		
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Weatherford, TX 76085		
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Weatherford, TX 76085		
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/33 Rpt: 14/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76085	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) writer/designer		9 Employer (See Instructions) self
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/33 Rpt: 15/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 05/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Jackson Walker LLP
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
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#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
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#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	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: 13/33 Rpt: 16/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Angelo, TX 76904		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Angelo, TX 76904		
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#: _____) Hurley, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Angelo, TX 76904		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ALLYSON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Elgin, TX 78621		
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
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: 14/33 Rpt: 17/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75203		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
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#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
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#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
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#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
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: 15/33 Rpt: 18/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) San Angelo Early Childhood Center
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/33 Rpt: 19/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) San Angelo Early Childhood Center
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/33 Rpt: 20/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 05/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> 6 Contributor address; City; State; Zip Code Hereford, TX 79045	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) Laurel Strategies
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/33 Rpt: 21/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Langley & Banack Inc
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/33 Rpt: 22/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 03/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Coordinated Campaign Director		9 Employer (See Instructions) Texas Democratic Party
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/33 Rpt: 23/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Nevarez Law Group PC
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/33 Rpt: 24/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> 6 Contributor address; City; State; Zip Code New Waverly, TX 77358	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Faa		9 Employer (See Instructions) Atcs
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/33 Rpt: 25/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code New Waverly, TX 77358	
8 Principal occupation / Job title (See Instructions) Faa		9 Employer (See Instructions) Atcs
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
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#: _____) Reeves, Julianne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
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: 23/33 Rpt: 26/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78209		
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#: _____) Reeves, Julianne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lamesa, TX 79331		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lamesa, TX 79331		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lamesa, TX 79331		
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: 24/33 Rpt: 27/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> 6 Contributor address; City; State; Zip Code Lamesa, TX 79331	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> Contributor address; City; State; Zip Code Lamesa, TX 79331	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> Contributor address; City; State; Zip Code Lamesa, TX 79331	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/33 Rpt: 28/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Palo Pinto, TX 76484		
8 Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions) Stephens Memorial Hospital
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Palo Pinto, TX 76484		
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Palo Pinto, TX 76484		
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Palo Pinto, TX 76484		
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Rachel	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Bandera, TX 78003		
Principal occupation / Job title (See Instructions) BCBA		Employer (See Instructions) San Antonio SSLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/33 Rpt: 29/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pediatrician		9 Employer (See Instructions) Shannon Clinic
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/33 Rpt: 30/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pediatrician		9 Employer (See Instructions) Shannon Clinic
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/33 Rpt: 31/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 05/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	
8 Principal occupation / Job title (See Instructions) Social Service		9 Employer (See Instructions) Bluebonnet Homes
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
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: 29/33 Rpt: 32/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
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#: _____) Smith, Sylvia Dickey <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
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#: _____) Tchenko, Thierry <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Chief Communications and Programs Officer		Employer (See Instructions) Rebuilding Together Houston
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and 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: 30/33 Rpt: 33/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> 6 Contributor address; City; State; Zip Code Dubin, TX 76446	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) artist and writer		9 Employer (See Instructions) self
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and 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: 31/33 Rpt: 34/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Brian <hr/> 6 Contributor address; City; State; Zip Code Mertzon, TX 76941	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Irion County ISD
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/33 Rpt: 35/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 05/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Austin, TX 78723	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Microsoft
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78723	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 01/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/33 Rpt: 36/44
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) pharmacist		9 Employer (See Instructions) walmart
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart

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: 1/8 Rpt: 37/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/17/2023	5 Payee name First Financial Bank	
6 Amount (\$) \$34.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601	
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 Bank Account monthly Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/01/2023	Candidate/Officeholder name First Financial Bank	
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 400 Pine Street Abilene, TX 79601	
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 Monthly Banking Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2023	Candidate/Officeholder name First Financial Bank	
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 400 Pine Street Abilene, TX 79601	
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 Monthly Banking Fees
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: 2/8 Rpt: 38/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 04/03/2023	5 Payee name First Financial Bank
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6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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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 Monthly Banking Fees
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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 05/05/2023	Payee name First Financial Bank
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Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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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 Monthly banking 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 06/05/2023	Payee name First Financial Bank
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Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly bank 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: 3/8 Rpt: 39/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/03/2023	5 Payee name Google	
6 Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet and website monthly fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet and website monthly
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2023	Payee name Google	
Amount (\$) \$43.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Internet Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2023	Payee name Google	
Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet monthly fees
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: 4/8 Rpt: 40/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 04/03/2023	5 Payee name Google	
6 Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Monthly Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2023	Payee name Google	
Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Monthly fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2023	Payee name Google	
Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet monthly fees
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: 5/8 Rpt: 41/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 01/26/2023	5 Payee name Survey Monkey	
6 Amount (\$) \$493.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 SW 5th Ave Portland, OR 97204-0000	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Survey Services annual fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2023	Payee name Zoom	
Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly video services fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2023	Payee name Zoom	
Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Subscription Monthly Fees
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: 6/8 Rpt: 42/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 03/27/2023	5 Payee name Zoom
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6 Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Monthly Subscription Fees
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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 04/27/2023	Payee name Zoom
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Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conf monthly fee
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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 05/30/2023	Payee name Zoom
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Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conf monthly fees
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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: 7/8 Rpt: 43/44	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 06/27/2023	5 Payee name Zoom
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6 Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conf monthly fees
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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 01/31/2023	Payee name iPay
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Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet online monthly payment 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 iPay
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Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly On-line payment fee
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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: 8/8 Rpt: 44/44	2	FILER NAME The 134 Political Action Committee	3	Filer ID (Ethics Commission Filers) 00085309
4	Date 04/28/2023	5	Payee name iPay		
6	Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense On-line payment fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 05/21/2023		Payee name iPay		
	Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online bill pay monthly fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 06/30/2023		Payee name iPay		
	Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online bill pay fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	