

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) 00055005	2 Total pages filed: 126
3 COMMITTEE NAME House Democratic Campaign 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 314 E Highland Mall Blvd Suite 104 Austin, TX 78752		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Stella	
		NICKNAME	LAST SUFFIX
			Savage
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9429 Peninsula Dr Dallas, TX 75218		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(469) 348-6786	
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	THROUGH	Month Day Year
	01/01/2023		06/30/2023
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME House Democratic Campaign Committee	13 Filer ID (Ethics Commission Filers) 00055005
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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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,920.25
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 14,500.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,593.73
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.

Stella Savage

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

17 COMMITTEE NAME House Democratic Campaign Committee		18 Filer ID (Ethics Commission Filers) 00055005
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,920.25
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	\$ 14,500.85
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: 1/96 Rpt: 4/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Patricia <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 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashara, Linda kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashara, Linda kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashara, Linda kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$25.00
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#: _____) Bashara, Linda kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	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: 2/96 Rpt: 5/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashara, Linda kay <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashara, Linda kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$25.00
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#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 01/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/96 Rpt: 6/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) University of Texas at Austin
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/96 Rpt: 7/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) University of Texas at Austin
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Texas at Austin
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	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: 5/96 Rpt: 8/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley, Nancy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75235	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	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#: _____) Berkley, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$25.00
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#: _____) Berkley, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	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: 6/96 Rpt: 9/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Dana	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Austin, TX 78751		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Dana	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
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#: _____) Blanton, Dana	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
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#: _____) Blanton, Dana	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
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#: _____) Blanton, Dana	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
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: 7/96 Rpt: 10/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Dana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blatnick, David <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supply Chain Engineer		Employer (See Instructions) Ryder Integrated Logistics
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blatnick, David <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supply Chain Engineer		Employer (See Instructions) Ryder Integrated Logistics
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blatnick, David <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supply Chain Engineer		Employer (See Instructions) Ryder Integrated Logistics
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blatnick, David <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supply Chain Engineer		Employer (See Instructions) Ryder Integrated Logistics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/96 Rpt: 11/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blatnick, David	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76131		
8 Principal occupation / Job title (See Instructions) Supply Chain Engineer		9 Employer (See Instructions) Ryder Integrated Logistics
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brody, Betsy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Richardson, TX 75080		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Collin College
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browne, Charletta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Seattle, WA 98109		
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#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/96 Rpt: 12/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/96 Rpt: 13/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	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: 11/96 Rpt: 14/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Houston, TX 77005		
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
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#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/96 Rpt: 15/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77005		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Evanston, IL 60201		
Principal occupation / Job title (See Instructions) clinical social worker		Employer (See Instructions) self
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Charles	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code McCalla, AL 35111		
Principal occupation / Job title (See Instructions) Paramedic		Employer (See Instructions) Pharmasafe
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tomball, TX 77375		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tomball, TX 77375		
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: 13/96 Rpt: 16/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77375	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Walta <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Deloris <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	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: 14/96 Rpt: 17/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Theresa <hr/> 6 Contributor address; City; State; Zip Code Union, KY 41091	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/96 Rpt: 18/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary	7 Amount of Contribution (\$) \$38.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) psychotherapist		9 Employer (See Instructions) self
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casarez, Jaime	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MESQUITE, TX 75150		
Principal occupation / Job title (See Instructions) Hospitality		Employer (See Instructions) Pakpao Thai Food
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassano, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sunset Valley, TX 78745		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassano, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sunset Valley, TX 78745		
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: 16/96 Rpt: 19/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassano, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Sunset Valley, TX 78745		
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#: _____) Cassano, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sunset Valley, TX 78745		
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#: _____) Cassano, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sunset Valley, TX 78745		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambless, Tamara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambless, Tamara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
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: 17/96 Rpt: 20/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambless, Tamara	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75214		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambless, Tamara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
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#: _____) Chambless, Tamara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
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#: _____) Chambless, Tamara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
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#: _____) Chipman, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code IRVING, TX 75060		
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: 18/96 Rpt: 21/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chipman, William <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75060	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chipman, William <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	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#: _____) Chipman, William <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
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#: _____) Chipman, William <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
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#: _____) Chipman, William <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	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: 19/96 Rpt: 22/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colgan-Davis, John <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19119	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colgan-Davis, John <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$18.00
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#: _____) Coronado, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$18.00
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: 20/96 Rpt: 23/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Patricia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$18.00
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#: _____) Coronado, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$18.00
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#: _____) Coronado, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) Self
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering 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: 21/96 Rpt: 24/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Engineering Consultant		9 Employer (See Instructions) Self
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) Self
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) Self
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) Self
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired - not employed		Employer (See Instructions) past- atty and St. Representative

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/96 Rpt: 25/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Austin, TX 78704	
8 Principal occupation / Job title (See Instructions) Retired - not employed		9 Employer (See Instructions) past- atty and St. Representative
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) Retired - not employed		Employer (See Instructions) past- atty and St. Representative
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) Retired - not employed		Employer (See Instructions) past- atty and St. Representative
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) Retired - not employed		Employer (See Instructions) past- atty and St. Representative
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) Retired - not employed		Employer (See Instructions) past- atty and St. Representative

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/96 Rpt: 26/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Northlake, TX 76247	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Estimator		9 Employer (See Instructions) TexOp construction
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn <hr/> Contributor address; City; State; Zip Code Northlake, TX 76247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) TexOp construction
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn <hr/> Contributor address; City; State; Zip Code Northlake, TX 76247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) TexOp construction
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn <hr/> Contributor address; City; State; Zip Code Northlake, TX 76247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) TexOp construction
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn <hr/> Contributor address; City; State; Zip Code Northlake, TX 76247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) TexOp construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/96 Rpt: 27/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Kathryn	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Northlake, TX 76247		
8 Principal occupation / Job title (See Instructions) Estimator		9 Employer (See Instructions) TexOp construction
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doerr, Anastasia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Kirkland, WA 98034		
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Microsoft
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brooklyn, NY 11233		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) MetLife
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brooklyn, NY 11233		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) MetLife
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brooklyn, NY 11233		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) MetLife

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/96 Rpt: 28/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11233	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) lawyer		9 Employer (See Instructions) MetLife
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11233	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) MetLife
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Paul <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11233	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) MetLife
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drix, Pamela <hr/> Contributor address; City; State; Zip Code Valois, NY 14841	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Laurence <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	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: 26/96 Rpt: 29/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Laurence <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94705	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Laurence <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Laurence <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$12.50
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#: _____) Elias, Laurence <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Laurence <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	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: 27/96 Rpt: 30/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) researcher		9 Employer (See Instructions) The University of Texas at Austin
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) The University of Texas at Austin
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) The University of Texas at Austin
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) The University of Texas at Austin
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) The University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/96 Rpt: 31/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) researcher		9 Employer (See Instructions) The University of Texas at Austin
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Texas A&M University
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Texas A&M University
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Texas A&M University
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Texas A&M University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/96 Rpt: 32/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) University Professor		9 Employer (See Instructions) Texas A&M University
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galanter, Philip <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Texas A&M University
Date 06/25/2023	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 (\$) \$12.50
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#: _____) Garza, Derrick <hr/> Contributor address; City; State; Zip Code Fort Lauderdale, FL 33308	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Machine operator		Employer (See Instructions) CHROMALLOY
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gee, Kenneth <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95814	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: 30/96 Rpt: 33/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Environmental engineer		9 Employer (See Instructions) Sage ATC Environmental Consulting
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental engineer		Employer (See Instructions) Sage ATC Environmental Consulting
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental engineer		Employer (See Instructions) Sage ATC Environmental Consulting
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental engineer		Employer (See Instructions) Sage ATC Environmental Consulting
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental engineer		Employer (See Instructions) Sage ATC Environmental Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/96 Rpt: 34/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geran, Jennifer	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612		
8 Principal occupation / Job title (See Instructions) Environmental engineer		9 Employer (See Instructions) Sage ATC Environmental Consulting
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerson, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rosenberg, TX 77471		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Garza Mgmt
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/96 Rpt: 35/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) psychologist		9 Employer (See Instructions) self
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Govindan, Vijay <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) AustinCSI
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) Texas State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/96 Rpt: 36/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Faculty		9 Employer (See Instructions) Texas State University
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) Texas State University
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) Texas State University
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) Texas State University
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillen, Nestor <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) Texas State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/96 Rpt: 37/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78703		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	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 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	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 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	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 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/96 Rpt: 38/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78703		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El paso, TX 79912		
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self employed
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El paso, TX 79912		
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self employed
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El paso, TX 79912		
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self employed
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El paso, TX 79912		
Principal occupation / Job title (See Instructions) Horse trainer		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: 36/96 Rpt: 39/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> 6 Contributor address; City; State; Zip Code Alvin, TX 77511	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) account manager		9 Employer (See Instructions) Kloeckner Metals
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) account manager		Employer (See Instructions) Kloeckner Metals
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) account manager		Employer (See Instructions) Kloeckner Metals
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) account manager		Employer (See Instructions) Kloeckner Metals
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) account manager		Employer (See Instructions) Kloeckner Metals

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/96 Rpt: 40/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha <hr/> 6 Contributor address; City; State; Zip Code Alvin, TX 77511	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) account manager		9 Employer (See Instructions) Kloeckner Metals
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Gina <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$83.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) House District 49
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Houston
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Houston
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/96 Rpt: 41/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) City of Houston
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Houston
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavacek, Ian <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Houston
Date 01/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Digital finance		Employer (See Instructions) Visa
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Digital finance		Employer (See Instructions) Visa

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/96 Rpt: 42/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Digital finance		9 Employer (See Instructions) Visa
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Digital finance		Employer (See Instructions) Visa
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Digital finance		Employer (See Instructions) Visa
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoberman, Louisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Digital finance		Employer (See Instructions) Visa
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan <hr/> Contributor address; City; State; Zip Code pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Gaming company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/96 Rpt: 43/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Gaming company
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Gaming company
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Gaming company
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Gaming company
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Gaming company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/96 Rpt: 44/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne 6 Contributor address; City; State; Zip Code Waco, TX 76712	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Baylor Scott & White Health
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Baylor Scott & White Health
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Baylor Scott & White Health
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Baylor Scott & White Health
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Baylor Scott & White Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/96 Rpt: 45/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, Wayne <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76712	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Baylor Scott & White Health
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopes, Josie <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Baylor College of Medicine
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopes, Josie <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Baylor College of Medicine
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopes, Josie <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Baylor College of Medicine
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopes, Josie <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Baylor College of Medicine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/96 Rpt: 46/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Austin, TX 78750		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Canyon Snow Consulting
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Canyon Snow Consulting
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Canyon Snow Consulting
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Canyon Snow Consulting
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Canyon Snow Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/96 Rpt: 47/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Canyon Snow Consulting
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Sharon <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Real estate investor		Employer (See Instructions) Self
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual insur co
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual insur co
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual insur co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/96 Rpt: 48/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78724	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Investigator		9 Employer (See Instructions) Texas mutual insur co
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual insur co
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas mutual insur co
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bruce <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bruce <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455	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: 46/96 Rpt: 49/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bruce	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455		
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#: _____) Jones, Bruce	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455		
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#: _____) Jones, Bruce	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455		
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#: _____) Jones, Bruce	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Joe	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77089		
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: 47/96 Rpt: 50/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Joe <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77089	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$5.00
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#: _____) Khan, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$5.00
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#: _____) Khan, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	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: 48/96 Rpt: 51/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kintaro, Dilbelau <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96826	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) Walmart
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjunct IT		Employer (See Instructions) State of Texas
Date 02/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjunct IT		Employer (See Instructions) State of Texas
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjunct IT		Employer (See Instructions) State of Texas
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjunct IT		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/96 Rpt: 52/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78747	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Adjunct IT		9 Employer (See Instructions) State of Texas
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Julia <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjunct IT		Employer (See Instructions) State of Texas
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Dell Inc.
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Dell Inc.
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Dell Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/96 Rpt: 53/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080		
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Dell Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Richardson, TX 75080		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Dell Inc.
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Garrett	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Richardson, TX 75080		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Dell Inc.
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	Amount of Contribution (\$) \$7.25
Contributor address; City; State; Zip Code Kannapolis, NC 28081		
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions) Publicis Selling Solutions
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	Amount of Contribution (\$) \$7.25
Contributor address; City; State; Zip Code Kannapolis, NC 28081		
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions) Publicis Selling Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/96 Rpt: 54/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	7 Amount of Contribution (\$) \$7.25
	6 Contributor address; City; State; Zip Code Kannapolis, NC 28081	
8 Principal occupation / Job title (See Instructions) Pharmaceutical Sales		9 Employer (See Instructions) Publicis Selling Solutions
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	Amount of Contribution (\$) \$7.25
	Contributor address; City; State; Zip Code Kannapolis, NC 28081	
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions) Publicis Selling Solutions
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	Amount of Contribution (\$) \$7.25
	Contributor address; City; State; Zip Code Kannapolis, NC 28081	
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions) Publicis Selling Solutions
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Veleria	Amount of Contribution (\$) \$7.25
	Contributor address; City; State; Zip Code Kannapolis, NC 28081	
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions) Publicis Selling Solutions
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Mathematics professor		Employer (See Instructions) Texas Tech University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/96 Rpt: 55/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Mathematics professor		9 Employer (See Instructions) Texas Tech University
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mathematics professor		Employer (See Instructions) Texas Tech University
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mathematics professor		Employer (See Instructions) Texas Tech University
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mathematics professor		Employer (See Instructions) Texas Tech University
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Ira W <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mathematics professor		Employer (See Instructions) Texas Tech University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/96 Rpt: 56/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie	7 Amount of Contribution (\$) \$25.00
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 02/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Marcos, TX 78666		
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: 54/96 Rpt: 57/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loise, Danie <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Adriana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
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#: _____) Lopez, Adriana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Adriana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
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#: _____) Lopez, Adriana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	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: 55/96 Rpt: 58/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Adriana <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78213	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Adriana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$8.00
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: 56/96 Rpt: 59/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$5.00
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#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
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#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
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#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) Rapid7
Date 02/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) Rapid7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/96 Rpt: 60/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) software engineer		9 Employer (See Instructions) Rapid7
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) Rapid7
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) Rapid7
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) Rapid7
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKechnie, Mark <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$3.00
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: 58/96 Rpt: 61/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKechnie, Mark <hr/> 6 Contributor address; City; State; Zip Code Justin, TX 76247	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKechnie, Mark <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKechnie, Mark <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$3.00
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#: _____) MacKechnie, Mark <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$3.00
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#: _____) MacKechnie, Mark <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$3.00
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: 59/96 Rpt: 62/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manthey, Ronald <hr/> 6 Contributor address; City; State; Zip Code Tool, TX 75143	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Koan Health
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Koan Health
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Koan Health
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Koan Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/96 Rpt: 63/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) Koan Health
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrs, Brian <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Koan Health
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> Contributor address; City; State; Zip Code Yorkville, NY 13495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) UTC
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> Contributor address; City; State; Zip Code Yorkville, NY 13495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) UTC
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> Contributor address; City; State; Zip Code Yorkville, NY 13495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) UTC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/96 Rpt: 64/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Yorkville, NY 13495	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) UTC
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> Contributor address; City; State; Zip Code Yorkville, NY 13495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) UTC
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Jeffrey <hr/> Contributor address; City; State; Zip Code Yorkville, NY 13495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) UTC
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	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: 62/96 Rpt: 65/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	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#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	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#: _____) McCammon, Lena <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	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: 63/96 Rpt: 66/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78750		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCammon, Lena	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78750		
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#: _____) McCammon, Lena	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78750		
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#: _____) McCammon, Lena	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendieta Jr, Ezequiel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78411		
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: 64/96 Rpt: 67/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendieta Jr, Ezequiel <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78411	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendieta Jr, Ezequiel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
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#: _____) Mendieta Jr, Ezequiel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendieta Jr, Ezequiel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
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#: _____) Mendieta Jr, Ezequiel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	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: 65/96 Rpt: 68/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
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: 66/96 Rpt: 69/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	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: 67/96 Rpt: 70/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Syst Anslst		Employer (See Instructions) UT MD Anderson Cancer Center
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Syst Anslst		Employer (See Instructions) UT MD Anderson Cancer Center
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Syst Anslst		Employer (See Instructions) UT MD Anderson Cancer Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/96 Rpt: 71/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Syst Anslst		9 Employer (See Instructions) UT MD Anderson Cancer Center
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Syst Anslst		Employer (See Instructions) UT MD Anderson Cancer Center
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesbitt, Kirk <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Syst Anslst		Employer (See Instructions) UT MD Anderson Cancer Center
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivares, Juventino <hr/> Contributor address; City; State; Zip Code Lavon, TX 75166	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortega de Valdes, Aurora <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	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: 69/96 Rpt: 72/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortega de Valdes, Aurora	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Southlake, TX 76092		
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#: _____) Ortega de Valdes, Aurora	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Southlake, TX 76092		
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#: _____) Ortega de Valdes, Aurora	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Southlake, TX 76092		
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#: _____) Ortega de Valdes, Aurora	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Southlake, TX 76092		
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#: _____) Ortega de Valdes, Aurora	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Southlake, TX 76092		
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: 70/96 Rpt: 73/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) Greenhill School
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Greenhill School
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Greenhill School
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Greenhill School
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Greenhill School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/96 Rpt: 74/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Susan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) Greenhill School
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Peniche Law firm PC
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Peniche Law firm PC
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Peniche Law firm PC
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Peniche Law firm PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/96 Rpt: 75/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77025		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Peniche Law firm PC
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peniche, Carlos	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Peniche Law firm PC
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Vikram	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78734		
Principal occupation / Job title (See Instructions) Cybersecurity		Employer (See Instructions) Not Employed
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Vikram	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78734		
Principal occupation / Job title (See Instructions) Cybersecurity		Employer (See Instructions) Not Employed
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Vikram	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78734		
Principal occupation / Job title (See Instructions) Cybersecurity		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: 73/96 Rpt: 76/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Vikram <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78734	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Cybersecurity		9 Employer (See Instructions) Not Employed
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phatak, Vikram <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cybersecurity		Employer (See Instructions) Not Employed
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QC Specialist/Inspector		Employer (See Instructions) NOWCC
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QC Specialist/Inspector		Employer (See Instructions) NOWCC
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QC Specialist/Inspector		Employer (See Instructions) NOWCC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/96 Rpt: 77/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Plano, TX 75025		
8 Principal occupation / Job title (See Instructions) QC Specialist/Inspector		9 Employer (See Instructions) NOWCC
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) QC Specialist/Inspector		Employer (See Instructions) NOWCC
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) QC Specialist/Inspector		Employer (See Instructions) NOWCC
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Laura	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Driftwood, TX 78619		
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#: _____) Richardson, Laura	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Driftwood, TX 78619		
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: 75/96 Rpt: 78/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Laura <hr/> 6 Contributor address; City; State; Zip Code Driftwood, TX 78619	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Laura <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$25.00
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#: _____) Richardson, Laura <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Laura <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Pan-americano.com

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/96 Rpt: 79/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carol <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) self-employed		9 Employer (See Instructions) Pan-americano.com
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Pan-americano.com
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, RC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$10.00
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#: _____) Rodriguez, RC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, RC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	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: 77/96 Rpt: 80/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, RC <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$10.00
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#: _____) Rodriguez, RC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, RC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Atlassian
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Atlassian

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/96 Rpt: 81/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Atlassian
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Atlassian
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Atlassian
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Atlassian
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) City of New York

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/96 Rpt: 82/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Staten Island, NY 10303		
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) City of New York
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Staten Island, NY 10303		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) City of New York
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Staten Island, NY 10303		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) City of New York
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Staten Island, NY 10303		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) City of New York
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Staten Island, NY 10303		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) City of New York

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/96 Rpt: 83/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> 6 Contributor address; City; State; Zip Code Cuero, TX 77954	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		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: 81/96 Rpt: 84/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Joseph <hr/> 6 Contributor address; City; State; Zip Code Cuero, TX 77954	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) THR
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) THR
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) THR
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) THR

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/96 Rpt: 85/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> 6 Contributor address; City; State; Zip Code Haltom City, TX 76117	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) THR
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleutel, Martha <hr/> Contributor address; City; State; Zip Code Haltom City, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) THR
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sugg, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sugg, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sugg, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		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: 83/96 Rpt: 86/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tehan, Mickey <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$3.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) VIA Technology
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) VIA Technology
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) VIA Technology
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) VIA Technology

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/96 Rpt: 87/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) VIA Technology
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa, Manuel	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) VIA Technology
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code IRVING, TX 75062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code IRVING, TX 75062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code IRVING, TX 75062		
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: 85/96 Rpt: 88/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code IRVING, TX 75062	
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#: _____) WILLIAMSON, STEPHEN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code IRVING, TX 75062	
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#: _____) WILLIAMSON, STEPHEN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code IRVING, TX 75062	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Alicia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Aubrey, TX 76227	
Principal occupation / Job title (See Instructions) Licensed professional counselor		Employer (See Instructions) Connections Wellness Group
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Coca-Cola Southwest Beverages

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/96 Rpt: 89/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Finance Manager		9 Employer (See Instructions) Coca-Cola Southwest Beverages
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Coca-Cola Southwest Beverages
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Coca-Cola Southwest Beverages
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Coca-Cola Southwest Beverages
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassenich, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Coca-Cola Southwest Beverages

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/96 Rpt: 90/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$10.00
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#: _____) Wharton, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$10.00
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#: _____) Wharton, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	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: 88/96 Rpt: 91/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/06/2023	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 (\$) \$5.00
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#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310	Amount of Contribution (\$) \$5.00
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#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/06/2023	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 (\$) \$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: 89/96 Rpt: 92/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Alamogordo, NM 88310	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/06/2023	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 (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waxahachie ISD
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waxahachie ISD
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waxahachie ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/96 Rpt: 93/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Waxahachie ISD
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waxahachie ISD
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gina	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waxahachie ISD
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wrolstad, James	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Liberty, MO 64068		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Belton, TX 76513		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Belton ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/96 Rpt: 94/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint <hr/> 6 Contributor address; City; State; Zip Code Belton, TX 76513	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) Belton ISD
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Belton ISD
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Belton ISD
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Belton ISD
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clint <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Belton ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/96 Rpt: 95/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mellow, bonnie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Montgomery, TX 77316		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mellow, bonnie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mellow, bonnie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
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#: _____) mellow, bonnie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mellow, bonnie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
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: 93/96 Rpt: 96/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mellow, bonnie <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> Contributor address; City; State; Zip Code austin, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) Texas Neuro Rehabilitation Center
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> Contributor address; City; State; Zip Code austin, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) Texas Neuro Rehabilitation Center
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> Contributor address; City; State; Zip Code austin, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) Texas Neuro Rehabilitation Center
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> Contributor address; City; State; Zip Code austin, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) Texas Neuro Rehabilitation Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/96 Rpt: 97/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> 6 Contributor address; City; State; Zip Code austin, TX 78744	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) nurse		9 Employer (See Instructions) Texas Neuro Rehabilitation Center
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nichols, nathalie <hr/> Contributor address; City; State; Zip Code austin, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) Texas Neuro Rehabilitation Center
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	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: 95/96 Rpt: 98/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) preston, marlow <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shaikh, hamid <hr/> Contributor address; City; State; Zip Code plano, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) southwest signs and graphics
Date 02/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shaikh, hamid <hr/> Contributor address; City; State; Zip Code plano, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) southwest signs and graphics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/96 Rpt: 99/126
2 FILER NAME House Democratic Campaign Committee		3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shaikh, hamid <hr/> 6 Contributor address; City; State; Zip Code plano, TX 75093	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) business owner		9 Employer (See Instructions) southwest signs and graphics
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shaikh, hamid <hr/> Contributor address; City; State; Zip Code plano, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) southwest signs and graphics
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) yeager, james mccarty <hr/> Contributor address; City; State; Zip Code santa fe, NM 87505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) yeager, james mccarty <hr/> Contributor address; City; State; Zip Code santa fe, NM 87505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) yeager, james mccarty <hr/> Contributor address; City; State; Zip Code santa fe, NM 87505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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: 1/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/02/2023	5 Payee name 5 Point PM, LLC	
6 Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name 5 Point PM, LLC	
Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name 5 Point PM, LLC	
Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
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: 2/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/02/2023	5 Payee name 5 Point PM, LLC	
6 Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2023	Payee name 5 Point PM, LLC	
Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2023	Payee name 5 Point PM, LLC	
Amount (\$) \$1,720.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 Highland Mall Blvd. Austin, TX 78752	
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 rent
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: 3/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 06/23/2023	5 Payee name AT&T	
6 Amount (\$) \$188.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2023	Candidate/Officeholder name AT&T	
Amount (\$) \$188.21 <input type="checkbox"/> Expenditure from corporate funds	Office sought 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2023	Candidate/Officeholder name AT&T	
Amount (\$) \$188.21 <input type="checkbox"/> Expenditure from corporate funds	Office sought 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
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: 4/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/23/2023	5 Payee name AT&T	
6 Amount (\$) \$189.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/22/2023	Payee name AT&T	
Amount (\$) \$189.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2023	Payee name AT&T	
Amount (\$) \$189.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Akard St. Dallas, TX 75202	
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 Phone and internet
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: 5/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/05/2023	5 Payee name Adobe Acrobat	
6 Amount (\$) \$22.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
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 Design software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2023	Candidate/Officeholder name Office sought Office held	
Payee name Adobe Acrobat		
Amount (\$) \$22.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
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 Design software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2023	Candidate/Officeholder name Office sought Office held	
Payee name Adobe Acrobat		
Amount (\$) \$259.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
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 Design 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: 6/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/07/2023	5 Payee name Adobe Acrobat	
6 Amount (\$) \$22.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
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 Design software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/04/2023	Payee name Adobe Acrobat	
Amount (\$) \$22.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
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 Design software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2023	Payee name Apollo Artistry	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
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: 7/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/30/2023	5 Payee name Apollo Artistry	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/20/2023	Payee name Apollo Artistry	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2023	Payee name Apollo Artistry	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
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: 8/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/21/2023	5 Payee name Apollo Artistry	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2023	Payee name Apollo Artistry	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1165 N. Clark Street Ste. 700 Chicago, IL 60610	
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 Web hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2023	Payee name Culligan Water	
Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 505 W Yager Ln. Austin, TX 78753	
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 water service
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: 9/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/24/2023	5 Payee name Culligan Water	
6 Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 505 W Yager Ln. Austin, TX 78753	
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 water service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2023	Candidate/Officeholder name Culligan Water	
Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	Office sought 505 W Yager Ln. Austin, TX 78753	
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 water service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/24/2023	Candidate/Officeholder name Culligan Water	
Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	Office sought 505 W Yager Ln. Austin, TX 78753	
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 water service
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: 10/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/24/2023	5 Payee name Culligan Water	
6 Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 505 W Yager Ln. Austin, TX 78753	
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 water service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/24/2023	Candidate/Officeholder name Culligan Water	
Amount (\$) \$17.86 <input type="checkbox"/> Expenditure from corporate funds	Office sought 505 W Yager Ln. Austin, TX 78753	
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 water service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 service fee
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: 11/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
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4 Date 06/26/2023	5 Payee name Frost Bank
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6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire fee
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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 06/20/2023	Payee name Frost Bank
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire 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 06/12/2023	Payee name Frost Bank
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire 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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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: 12/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
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4 Date 06/05/2023	5 Payee name Frost Bank
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6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire fee
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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 05/31/2023	Payee name Frost Bank
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 service 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 Frost Bank
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire 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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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: 13/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/22/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/08/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/08/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 14/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/01/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/28/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 service fee
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 15/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 04/17/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2023	Payee name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 16/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
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4 Date 03/31/2023	5 Payee name Frost Bank
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6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 service fee
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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 03/27/2023	Payee name Frost Bank
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire 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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Date 03/20/2023	Payee name Frost Bank
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205
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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 wire 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: 17/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 03/13/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 service fee
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: 18/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/27/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2023	Payee name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2023	Payee name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 19/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/06/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 service fee
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/30/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 20/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/23/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/17/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
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: 21/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 01/03/2023	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W. Houston St. San Antonio TX, 78205	
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 wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/03/2023	Candidate/Officeholder name Office sought Office held	
Payee name Google LLC		
Amount (\$) \$25.58 <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) 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 email hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/01/2023	Candidate/Officeholder name Office sought Office held	
Payee name Intuit QuickBooks		
Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting software
9 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: 22/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/01/2023	5 Payee name Intuit QuickBooks	
6 Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Intuit QuickBooks	
Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2023	Payee name Intuit QuickBooks	
Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting 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: 23/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 02/01/2023	5 Payee name Intuit QuickBooks	
6 Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2023	Payee name Intuit QuickBooks	
Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2634 Marine Way Mountain View, CA 94043	
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 accounting software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2023	Payee name Paragon Payment Solutions	
Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282	
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 NGP transaction fee
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: 24/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/02/2023	5 Payee name Paragon Payment Solutions	
6 Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282	
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 NGP transaction fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Paragon Payment Solutions	
Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282	
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 NGP transaction fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2023	Payee name Paragon Payment Solutions	
Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282	
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 NGP transaction fee
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: 25/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
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4 Date 02/02/2023	5 Payee name Paragon Payment Solutions
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6 Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282
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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 NGP transaction fee
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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 01/03/2023	Payee name Paragon Payment Solutions
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Amount (\$) \$27.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Rd. Suite 202 Tempe, AZ 85282
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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 NGP transaction 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 06/22/2023	Payee name ZOOM
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Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113
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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 virtual meeting service
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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: 26/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
4 Date 05/22/2023	5 Payee name ZOOM	
6 Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113	
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 virtual meeting service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2023	Candidate/Officeholder name Office sought Office held	
Payee name ZOOM		
Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113	
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 virtual meeting service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/23/2023	Candidate/Officeholder name Office sought Office held	
Payee name ZOOM		
Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113	
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 virtual meeting service
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	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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/27 Rpt:	2 FILER NAME House Democratic Campaign Committee	3 Filer ID (Ethics Commission Filers) 00055005
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4 Date 03/09/2023	5 Payee name ZOOM
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6 Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113
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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 virtual meeting service
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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 01/23/2023	Payee name ZOOM
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Amount (\$) \$15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113
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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 virtual meeting service
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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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