GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form		1 Filer ID (Ethics Commission 00081055	n Filers)	2 Total page	es filed: 46	
3	COMMITTEE NAME					OFFIC	E USE ONLY	
	Turn Texas Blue P	AC				Date Received		
						ELECTRO	NICALLY FILED	
						07/16/2023		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; 0	CITY	; STATE;	ZIP CODE	1		
	ADDRESS	1006 Banister Ln. Bldg 10, Apt. 1001				Date Hand-delive	ered or Date Postmarked	
	Change of Address							
		Austin, TX 78704				Receipt #	Amount	
						Date Processed		
						Duie Processeu		
						Date Imaged		
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST				MI		
	NAME	Mr. Steven						
		I NICKNAME LAST				SUFFIX		
		Rivas						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / S	SUITE #; CITY;		STATE; ZIP COD	ЭE
	TREASURER STREET	1006 Banister Ln. Bldg. 10, Apt. 1001						
	ADDRESS							
	(Residence or Business)	Austin, TX 78704						
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT /	SUITE #; CITY	(;	STATE; ZIP COD	ЭE
	MAILING	1006 Banister Ln. Bldg. 10, Apt. 1001						
	ADDRESS							
	Change of Address	Austin, TX 78704						
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	E	KTENSION				
	PHONE	(210) 310-4224						
<u>م</u>	REPORT							
ľ	TYPE	January 15	30tł	a day before election	L	Dissolution ((Attach PAC-DR)	
		X July 15	8th	day before election		10th day after termination	er campaign treasurer	
		X July 15	Run	off				
10	PERIOD	Month Day Year			Month Day	Year		
	COVERED	01/01/2023	TH	ROUGH	06/30/202	23		
		ļ						
11	ELECTION	ELECTION DATE Month Day Year	1 Dri	mary	ELECTION TYPE	Other		
		11/07/2023	-	1				
			Ge	neral	Special			
\vdash								
	GO TO PAGE 2							
Foi	rms provided by Tex	xas Ethics Commission www	.eth	ics.state.tx.us		V	ersion V3.5.1.a18ea	ı2ca

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Turn Texas Blue PAC			0008105	55
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,606.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,163.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	56.69
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Stev	en Rivas	
		Signature of Car	mpaign Trea	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	nis the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of o	fficer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

SUBTOTALS - GPAC	C	FORM GPAC
17 COMMITTEE NAME Turn Texas Blue PAC	18 Filer ID 00081055	3 of 46 (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,606.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	GANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 2,163.24
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

SCHEDULE	A1
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			1		
The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 1/31 Rpt: 4/46	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Turn Texas E				00081055	TT net cy
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
01/29/2023	ANDERSON, SHANNON		ľ		\$25.00
	6 Contributor address; City; State; Zip Code		·		
	AUSTIN, TX 78717				
	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
NOT EMPLC)YED	NOT EMPLOYED			
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
02/28/2023	ANDERSON, SHANNON				\$25.00
	Contributor address; City; State; Zip Code		1		
	AUSTIN, TX 78717		Ĺ		
Principal occup NOT EMPLC	pation / Job title (See Instructions)	Employer (See Instructions NOT EMPLOYED	S)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 25 00
03/29/2023	ANDERSON, SHANNON				\$25.00
	Contributor address; City; State; Zip Code				
	AUSTIN, TX 78717				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
NOT EMPLC	JYED	NOT EMPLOYED			
Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
04/29/2023	ANDERSON, SHANNON				\$25.00
	Contributor address; City; State; Zip Code		·		
	AUSTIN, TX 78717	<u>.</u>			
	pation / Job title (See Instructions)	Employer (See Instructions	s)		
NOT EMPLC)YED	NOT EMPLOYED			
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
05/29/2023	ANDERSON, SHANNON			\$25.00	
	Contributor address; City; State; Zip Code				
	AUSTIN, TX 78717				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions			
NOT EMPLC		NOT EMPLOYED	5)		

SCHEDULE	A1
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The lactru	tion Quide combine how to complete this f		1 Total pages Schedule	A1:
The Instru	ction Guide explains how to complete this f	orm.	Sch: 2/31 Rpt: 5/46	
2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)
Turn Texas	Blue PAC		00081055	
4 Date 06/29/2023	5 Full name of contributor out-of-state PAC (ID#: ANDERSON, SHANNON)	7 Amount of Contribution	n (\$) \$25.00
	6 Contributor address; City; State; Zip Code			
	AUSTIN, TX 78717			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
NOT EMPLO	DYED	NOT EMPLOYED		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution	n (\$)
03/16/2023	ARENAS, ANDRAGALE			\$10.00
00,10,2022				+=0
	Contributor address; City; State; Zip Code			
	ST. AUGUSTINE, FL 32092			
Principal occl	I upation / Job title (See Instructions)	Employer (See Instructions)	·)	
NOT EMPLO		NOT EMPLOYED	, ,	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution	n (\$)
		,		\$10.00
04/16/2023				T - - -
04/16/2023	ARENAS, ANDRAGALE			
04/16/2023	Contributor address; City; State; Zip Code			
04/16/2023				
04/16/2023				
	Contributor address; City; State; Zip Code	Employer (See Instructions))	
	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions)	Employer (See Instructions))	
Principal occu	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions)) Amount of Contribution	n (\$)
Principal occu NOT EMPLO	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED			n (\$) \$10.00
Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor out-of-state PAC (ID#:			. ,
Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE			. ,
Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE			. ,
Principal occu NOT EMPLO Date 05/16/2023	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092	NOT EMPLOYED	Amount of Contribution	. ,
Principal occu NOT EMPLO Date 05/16/2023	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions)	NOT EMPLOYED	Amount of Contribution	. ,
Principal occu NOT EMPLO Date 05/16/2023	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions)	NOT EMPLOYED	Amount of Contribution	. ,
Principal occu NOT EMPLO Date 05/16/2023	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions)	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor out-of-state PAC (ID#:_ ARENAS, ANDRAGALE Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor out-of-state PAC (ID#:_	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO Date	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) OYED Full name of contributor	NOT EMPLOYED	Amount of Contribution	\$10.00
Principal occu NOT EMPLO Date 05/16/2023 Principal occu NOT EMPLO Date 06/16/2023	Contributor address; City; State; Zip Code ST. AUGUSTINE, FL 32092 upation / Job title (See Instructions) DYED Full name of contributor	NOT EMPLOYED	Amount of Contribution	\$10.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/31 Rpt: 6/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/17/2023 BAGG, DANA \$20.00 6 Contributor address; City; State; Zip Code SEATTLE, WA 98115 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/17/2023 \$20.00 BAGG, DANA Contributor address; City; State; Zip Code SEATTLE, WA 98115 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/17/2023 BAGG, DANA \$20.00 Contributor address; City; State; Zip Code SEATTLE, WA 98115 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/17/2023 \$20.00 BAGG, DANA Contributor address; City; State; Zip Code SEATTLE, WA 98115 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/17/2023 \$20.00 BAGG, DANA Contributor address; City; State; Zip Code SEATTLE, WA 98115 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/31 Rpt: 7/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/21/2023 BOWMAN, MARY B \$21.00 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/16/2023 BOYLE, JODI \$25.00 Contributor address; City; State; Zip Code PETALUMA, CA 94952 Principal occupation / Job title (See Instructions) Employer (See Instructions) ENROLLMENT DIRECTOR **CREDO HIGH SCHOOL** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/11/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/31 Rpt: 8/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/31/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 02/11/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/31 Rpt: 9/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/28/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/11/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/31 Rpt: 10/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/31/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 04/11/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/31 Rpt: 11/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/30/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 05/11/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/31 Rpt: 12/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/08/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/11/2023 BRAMBLETT, JOHN \$10.00 Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/20/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/31 Rpt: 13/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/24/2023 BRAMBLETT, JOHN \$10.00 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2023 \$10.00 BRAMBLETT, JOHN Contributor address; City; State; Zip Code WHITNEY, TX 76692 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/18/2023 BYERS, ROBERT \$25.00 Contributor address; City; State; Zip Code WILLOW PARK, TX 76097 Principal occupation / Job title (See Instructions) Employer (See Instructions) MANAGER CITY OF FORT WORTH Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 02/18/2023 \$25.00 BYERS, ROBERT Contributor address; City; State; Zip Code WILLOW PARK, TX 76097 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CITY OF FORT WORTH** MANAGER Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/18/2023 \$25.00 BYERS, ROBERT Contributor address; City; State; Zip Code WILLOW PARK, TX 76097 Principal occupation / Job title (See Instructions) Employer (See Instructions) MANAGER **CITY OF FORT WORTH**

SCHEDULE	A1
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	The Instru	iction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/31 Rpt: 14/46	_
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
-	Turn Texas			-	00081055	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	04/18/2023					\$25.00
		6 Contributor address; City; State; Zip Code				
		WILLOW PARK, TX 76097				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions			
	MANAGER		CITY OF FORT WORTH	4		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/18/2023	BYERS, ROBERT				\$25.00
		Contributor address; City; State; Zip Code		1		
		WILLOW PARK, TX 76097				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions			
	MANAGER		CITY OF FORT WORTH	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/18/2023	BYERS, ROBERT				\$25.00
		Contributor address; City; State; Zip Code		1		
		WILLOW PARK, TX 76097				
		upation / Job title (See Instructions)	Employer (See Instructions			
	MANAGER		CITY OF FORT WORTH	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/03/2023	CORD, ERIN				\$25.00
		Contributor address; City; State; Zip Code		1		
		AUSTIN, TX 78750				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	ENVIRONM	IENTAL EDUCATOR A	TRAVIS AUDUBON			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	01/14/2023	CROCKETT, PATRICIA				\$25.00
		Contributor address; City; State; Zip Code	1	1		
		HUNT, TX 78024				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	RETIRED TI	EACHER	NONE			

SCHEDULE A1

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/31 Rpt: 15/46	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Turn Texas I			<u> </u>	00081055	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/14/2023	CROCKETT, PATRICIA				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		HUNT, TX 78024				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	RETIRED TE	EACHER	NONE			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/14/2023	CROCKETT, PATRICIA				\$25.00
		Contributor address; City; State; Zip Code		1		
		HUNT, TX 78024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	RETIRED TE	EACHER	NONE			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	04/14/2023	CROCKETT, PATRICIA				\$25.00
				•		
		HUNT, TX 78024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	RETIRED TE	EACHER	NONE			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	05/14/2023	CROCKETT, PATRICIA				\$25.00
	•	Contributor address; City; State; Zip Code		1		
		HUNT, TX 78024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	RETIRED TE	EACHER	NONE			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/14/2023				,	\$25.00
	•	Contributor address; City; State; Zip Code		1		
		HUNT, TX 78024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	⊥		
	RETIRED TE		NONE	-,		
⊢						
1						1

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/31 Rpt: 16/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/15/2023 CUELLAR, SUSAN \$25.00 6 Contributor address; City; State; Zip Code **DALLAS. TX 75248** 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **RETIRED- NOT EMPLOYED** SELF Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/21/2023 \$10.00 DAMRI, MEHROO Contributor address; City; State; Zip Code EULESS, TX 76040 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/15/2023 DUSENBERRY, BETHANY \$5.00 Contributor address; City; State; Zip Code HENDERSONVILLE, NC 28791 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2023 FOSTER, CARL \$1.00 Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/19/2023 \$1.00 FOSTER, CARL Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/31 Rpt: 17/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/19/2023 FOSTER, CARL \$1.00 6 Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/19/2023 FOSTER, CARL \$1.00 Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/19/2023 FOSTER, CARL \$1.00 Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 06/19/2023 FOSTER, CARL \$1.00 Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVANT** NEW YORK STATE Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/03/2023 \$25.00 GRUBBS, DAVID Contributor address; City; State; Zip Code PHOENIX, AZ 85016 Principal occupation / Job title (See Instructions) Employer (See Instructions) FINANCE UNITED AUTO

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/31 Rpt: 18/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 **5** Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/30/2023 HABERSANG, ROLF W \$25.00 6 Contributor address; City; State; Zip Code AMARILLO, TX 79124 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/28/2023 HABERSANG, ROLF W \$25.00 Contributor address; City; State; Zip Code AMARILLO, TX 79124 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/30/2023 HABERSANG, ROLF W \$25.00 Contributor address; City; State; Zip Code AMARILLO, TX 79124 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/02/2023 \$3.00 HART, JOSHUA Contributor address; City; State; Zip Code BETHESDA, MD 20817 Principal occupation / Job title (See Instructions) Employer (See Instructions) CONSULTANT LMI Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/07/2023 \$25.00 HIGHTOWER, EDWIN Contributor address; City; State; Zip Code DALLAS, TX 75254 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTORNEY CALIBER

MONETARY POLITICAL CONTRIBUTIONS **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/31 Rpt: 19/46 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 02/07/2023 HIGHTOWER, EDWIN 6 Contributor address; City; State; Zip Code

	DALLAS, TX 75254			
8 Principal occu ATTORNEY	ipation / Job title (See Instructions)	9 Employer (See Instructions) CALIBER		
Date 03/07/2023	Full name of contributorout-of-state PAC (ID#: HIGHTOWER, EDWIN Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$25.00
	DALLAS, TX 75254			
Principal occu ATTORNEY	upation / Job title (See Instructions)	Employer (See Instructions) CALIBER		
Date 04/07/2023	Full name of contributor out-of-state PAC (ID#: HIGHTOWER, EDWIN Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$25.00
	DALLAS, TX 75254			
Principal occu ATTORNEY	upation / Job title (See Instructions)	Employer (See Instructions) CALIBER		
Date 05/07/2023	Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$25.00
	DALLAS, TX 75254 upation / Job title (See Instructions)	Employer (See Instructions)		
ATTORNEY Date 06/07/2023	Full name of contributor out-of-state PAC (ID#: HIGHTOWER, EDWIN Contributor address; City; State; Zip Code DALLAS, TX 75254)	Amount of Contribution (\$)	\$25.00
Principal occu ATTORNEY	upation / Job title (See Instructions)	Employer (See Instructions) CALIBER		

SCHEDULE A1

\$25.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/31 Rpt: 20/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/22/2023 HINCH, DALE \$25.00 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/16/2023 \$50.00 JOHNSON, ELLIOT Contributor address; City; State; Zip Code AUSTIN, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) ARCHITECT SELF Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/21/2023 KING, SUE \$25.00 Contributor address; City; State; Zip Code SAUSALITO, CA 94965 Principal occupation / Job title (See Instructions) Employer (See Instructions) SHOP OWNER SELF Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/21/2023 \$25.00 KING, SUE Contributor address; City; State; Zip Code SAUSALITO, CA 94965 Principal occupation / Job title (See Instructions) Employer (See Instructions) SHOP OWNER SELF Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/21/2023 \$25.00 KING, SUE Contributor address; City; State; Zip Code SAUSALITO, CA 94965 Principal occupation / Job title (See Instructions) Employer (See Instructions) SHOP OWNER SELF

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/31 Rpt: 21/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/21/2023 KING, SUE \$25.00 6 Contributor address; City; State; Zip Code SAUSALITO, CA 94965 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) SELF SHOP OWNER Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/21/2023 KING, SUE \$25.00 Contributor address; City; State; Zip Code SAUSALITO, CA 94965 Principal occupation / Job title (See Instructions) Employer (See Instructions) SHOP OWNER SELF Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/21/2023 KING, SUE \$25.00 Contributor address; City; State; Zip Code SAUSALITO, CA 94965 Principal occupation / Job title (See Instructions) Employer (See Instructions) SHOP OWNER SELF Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/15/2023 \$25.00 LEVY, EUGENE H Contributor address; City; State; Zip Code HOUSTON, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) PROFESSOR RICE UNIVERSITY Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/22/2023 \$25.00 MONTGOMERY, E.M. Contributor address; City; State; Zip Code **GEORGETOWN, TX 78628** Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/31 Rpt: 22/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/22/2023 MOONEY, JOAN \$25.00 6 Contributor address; City; State; Zip Code SORING, TX 77380 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/22/2023 MUELLER, JOAN \$25.00 Contributor address; City; State; Zip Code AUSTIT, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/11/2023 NESTER, PATRICK \$25.00 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/11/2023 \$25.00 NESTER, PATRICK Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/11/2023 \$25.00 NESTER, PATRICK Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/31 Rpt: 23/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/11/2023 NESTER, PATRICK \$25.00 6 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/11/2023 NESTER, PATRICK \$25.00 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/11/2023 NESTER, PATRICK \$25.00 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/14/2023 \$10.00 PANOS, PATRICK Contributor address; City; State; Zip Code SANDY, UT 84094 Principal occupation / Job title (See Instructions) Employer (See Instructions) PROFESSOR UNIVERSITY OF UTAH Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/14/2023 \$10.00 PANOS, PATRICK Contributor address; City; State; Zip Code SANDY, UT 84094 Principal occupation / Job title (See Instructions) Employer (See Instructions) PROFESSOR UNIVERSITY OF UTAH

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 21/31 Rpt: 24/46	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Turn Texas I				00081055	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	03/14/2023	PANOS, PATRICK				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		SANDY, UT 84094				
8		upation / Job title (See Instructions)	9 Employer (See Instructions			
	PROFESSO	'R	UNIVERSITY OF UTAH	1		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/14/2023	PANOS, PATRICK				\$10.00
		Contributor address; City; State; Zip Code		1		
		SANDY, UT 84094	1	L		
		upation / Job title (See Instructions)	Employer (See Instructions			
	PROFESSO	R	UNIVERSITY OF UTAH	 		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/14/2023	PANOS, PATRICK				\$10.00
	Contributor address; City; State; Zip Code					
	SANDY, UT 84094					
	Principal occupation / Job title (See Instructions) Employer (See Instruction PROFESSOR UNIVERSITY OF UTAI		UNIVERSITY OF UTAH			
				, —		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#10.00
	06/14/2023	PANOS, PATRICK				\$10.00
		Contributor address; City; State; Zip Code				
		SANDY, UT 84094				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	PROFESSO		UNIVERSITY OF UTAH			
	Date			Γ	Amount of Contribution (\$)	
	03/16/2023	Full name of contributor out-of-state PAC (ID#: PFIESTER, R E)			\$50.00
	0011012020	Contributor address; City; State; Zip Code		{		Ψ00.00
		Continuation address, City, State, Zip Code				
		LOS ANGELES, CA 90039				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
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SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 22/31 Rpt: 25/46	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Turn Texas I	Blue PAC			00081055	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	
-	01/26/2023	QUERUSIO, LUIGI	,			\$5.00
	•			\mathbf{I}		• -
		NAPLES, FL 34109				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ج)		
	NOT EMPLO		NOT EMPLOYED	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>)	Γ	Amount of Contribution (\$)	
	01/14/2023	RAIZMAN, DOROTHY	/		AIIIOUTIL OF COntribution (ψ)	\$25.00
	01/14/2020			-		φ20.00
		Contributor address; City; State; Zip Code				
		LIGONIER, PA 15658				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\sum_{i}		
	NOT EMPLO		NOT EMPLOYED	<i>י</i> י		
╘				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	+ 00
	02/14/2023	RAIZMAN, DOROTHY				\$25.00
		Contributor address; City; State; Zip Code]		
L	LIGONIER, PA 15658					
		Employer (See Instructions	5)			
L	NOT EMPLOYED NOT EMPLOYED		NOT EMPLOYED			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/14/2023	RAIZMAN, DOROTHY				\$25.00
		Contributor address; City; State; Zip Code		1		
		LIGONIER, PA 15658				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	NOT EMPLO	JYED	NOT EMPLOYED			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	04/14/2023	RAIZMAN, DOROTHY				\$25.00
		Contributor address; City; State; Zip Code		ł		
		LIGONIER, PA 15658				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ட</u> 5)		
	NOT EMPLOYED NOT EMPLOYED					
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SCHEDULE A1

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The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 23/31 Rpt: 26/46
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Turn Texas			00081055
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
05/14/2023	RAIZMAN, DOROTHY		\$25.00
	6 Contributor address; City; State; Zip Code		1
	LIGONIER, PA 15658		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
NOT EMPLO	JYED	NOT EMPLOYED	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/14/2023	RAIZMAN, DOROTHY		\$25.00
			•
	Continuation address, City, State, Zip Code		
	LIGONIER, PA 15658		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
NOT EMPLO		NOT EMPLOYED	<i>''</i>
Date)	Amount of Contribution (\$)
03/16/2023	REPEDE, KIM		\$30.00
	Contributor address; City; State; Zip Code]
	GEORGETOWN, TX 78633		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
NOT EMPLOYED NOT EMPLOYED		NOT EMPLOYED	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/15/2023	SCHNEIDER, TRACEY	,	\$25.00
00.20.20.20			•
	Contributor address; City; State; Zip Code		
	CONROE, TX 77385		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)
NOT EMPLO		NOT EMPLOYED	,
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
03/16/2023	SELLS, GREG	/	\$5.00
03/10/2023			
	Contributor address; City; State; Zip Code		
	AUSTIN, TX 78741		
Drincinal occu	apation / Job title (See Instructions)	Employer (See Instructions	<u></u>
CIVIL SERV		INTERNAL REVENUE S	SERVICE

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 24/31 Rpt: 27/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/16/2023 SELLS, GREG \$5.00 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **CIVIL SERVICE** INTERNAL REVENUE SERVICE Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/16/2023 SELLS, GREG \$5.00 Contributor address; City; State; Zip Code AUSTIN, TX 78741 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVICE** INTERNAL REVENUE SERVICE Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:_ 06/16/2023 SELLS, GREG \$5.00 Contributor address; City; State; Zip Code AUSTIN, TX 78741 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CIVIL SERVICE** INTERNAL REVENUE SERVICE Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/16/2023 \$15.00 SHALLER, VIRGINIA Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33401 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/03/2023 SHRAKE, ANITA \$1.00 Contributor address; City; State; Zip Code HENDERSON, NV 89012 Principal occupation / Job title (See Instructions) Employer (See Instructions) RETIRED NONE

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 25/31 Rpt: 28/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/30/2023 SMITH, VIRGINIA \$25.00 6 Contributor address; City; State; Zip Code STRATFORD, CT 06614 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/03/2023 SOMMERHAUSER, JAMES \$15.00 Contributor address; City; State; Zip Code **BREMERTON, WA 98311** Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/17/2023 SPENCER, LARRY \$5.00 Contributor address; City; State; Zip Code PALMER, TX 75152 Principal occupation / Job title (See Instructions) Employer (See Instructions) MUSICIAN SELF Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/17/2023 \$5.00 SPENCER, LARRY Contributor address; City; State; Zip Code PALMER, TX 75152 Principal occupation / Job title (See Instructions) Employer (See Instructions) **MUSICIAN** SELF Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/17/2023 \$5.00 SPENCER, LARRY Contributor address; City; State; Zip Code PALMER, TX 75152 Principal occupation / Job title (See Instructions) Employer (See Instructions) MUSICIAN SELF

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 26/31 Rpt: 29/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/17/2023 SPENCER, LARRY \$5.00 6 Contributor address; City; State; Zip Code PALMER, TX 75152 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) SELF MUSICIAN Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/17/2023 \$5.00 SPENCER, LARRY Contributor address; City; State; Zip Code PALMER, TX 75152 Principal occupation / Job title (See Instructions) Employer (See Instructions) SELF MUSICIAN Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/17/2023 SPENCER, LARRY \$5.00 Contributor address; City; State; Zip Code PALMER, TX 75152 Principal occupation / Job title (See Instructions) Employer (See Instructions) MUSICIAN SELF Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/01/2023 \$10.00 THOMPSON, ADAM Contributor address; City; State; Zip Code AUSTIN, TX 78721 Principal occupation / Job title (See Instructions) Employer (See Instructions) ENGINEER UPLOGIX INC. Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/01/2023 \$10.00 THOMPSON, ADAM Contributor address; City; State; Zip Code AUSTIN, TX 78721 Principal occupation / Job title (See Instructions) Employer (See Instructions) ENGINEER UPLOGIX INC.

SCHEDULE A1

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	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 27/31 Rpt: 30/46	
2	FILER NAME		1	3	Filer ID (Ethics Commission	Filers)
	Turn Texas I	Blue PAC	1		00081055	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/01/2023	THOMPSON, ADAM	1			\$10.00
		6 Contributor address; City; State; Zip Code		1		
			1			
			1			
		AUSTIN, TX 78721				
8			9 Employer (See Instructions)	5)		
	ENGINEER		UPLOGIX INC.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/01/2023	THOMPSON, ADAM	1			\$10.00
		Contributor address; City; State; Zip Code		1		
			1			
			1			
		AUSTIN, TX 78721				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	ENGINEER		UPLOGIX INC.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/21/2023	TINKER, KEVIN	1			\$25.00
		Contributor address; City; State; Zip Code	1	1		
			!			
			1			
		GRAND PRAIRIE, TX 75052				
			Employer (See Instructions)	5)		
L		ON OFFICER	USCIS			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/21/2023	TINKER, KEVIN				\$25.00
		Contributor address; City; State; Zip Code	,	1		
			1			
			1			
L		GRAND PRAIRIE, TX 75052				
	•	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
L		ON OFFICER	USCIS	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/21/2023	TINKER, KEVIN				\$25.00
		Contributor address; City; State; Zip Code				
			1			
			1			
L		GRAND PRAIRIE, TX 75052				
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
IMMIGRATION OFFICER USCIS						

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 28/31 Rpt: 31/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/21/2023 TINKER, KEVIN \$25.00 6 Contributor address; City; State; Zip Code **GRAND PRAIRIE, TX 75052** 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **IMMIGRATION OFFICER** USCIS Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/21/2023 TINKER, KEVIN \$25.00 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052 Principal occupation / Job title (See Instructions) Employer (See Instructions) **IMMIGRATION OFFICER** USCIS Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/21/2023 TINKER, KEVIN \$25.00 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052 Principal occupation / Job title (See Instructions) Employer (See Instructions) **IMMIGRATION OFFICER** USCIS Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/16/2023 \$10.00 TONSETH, DAVE Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55401 Principal occupation / Job title (See Instructions) Employer (See Instructions) SELF IT ANALYST Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/16/2023 \$10.00 TONSETH, DAVE Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55401 Principal occupation / Job title (See Instructions) Employer (See Instructions) IT ANALYST SELF

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 29/31 Rpt: 32/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/11/2023 WATTS, PATTI \$25.00 6 Contributor address; City; State; Zip Code DENTON, TX 76207 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/11/2023 WATTS, PATTI \$25.00 Contributor address; City; State; Zip Code DENTON, TX 76207 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/11/2023 WATTS, PATTI \$25.00 Contributor address; City; State; Zip Code DENTON, TX 76207 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 \$25.00 WATTS, PATTI Contributor address; City; State; Zip Code DENTON, TX 76207 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/11/2023 \$25.00 WATTS, PATTI Contributor address; City; State; Zip Code DENTON, TX 76207 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 30/31 Rpt: 33/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/11/2023 WATTS, PATTI \$25.00 6 Contributor address; City; State; Zip Code DENTON, TX 76207 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/30/2023 WEATHERLY, JAMES \$25.00 Contributor address; City; State; Zip Code HOUSON, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED RETIRED Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/18/2023 WEIL, JESSE L \$10.00 Contributor address; City; State; Zip Code LEXINGTON, KY 40517 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2023 \$10.00 WEIL, JESSE L Contributor address; City; State; Zip Code LEXINGTON, KY 40517 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/18/2023 \$10.00 WEIL, JESSE L Contributor address; City; State; Zip Code LEXINGTON, KY 40517 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 31/31 Rpt: 34/46 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Turn Texas Blue PAC 00081055 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 04/18/2023 WEIL, JESSE L \$10.00 6 Contributor address; City; State; Zip Code LEXINGTON, KY 40517 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/18/2023 \$10.00 WEIL, JESSE L Contributor address; City; State; Zip Code LEXINGTON, KY 40517 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/18/2023 WEIL, JESSE L \$10.00 Contributor address; City; State; Zip Code LEXINGTON, KY 40517 Principal occupation / Job title (See Instructions) Employer (See Instructions) NOT EMPLOYED NOT EMPLOYED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhaed/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 1/12 Rpt: 35/46	Turn Texas Blue PAC 00081055		
4 Date	5 Payee name		
01/10/2023	Campaign Partner		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$49.00	16 Dudley Street		
Expenditure from corporate funds	Fitchburg, MA 01420		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Web Services 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
01/13/2023	Dreamhost		
Amount (\$)	Payee address; City; State; Zip Code		
\$140.88	417 Associated Road		
Expenditure from corporate funds	PMB #257 Brea, CA 92821		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Web Services 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
06/26/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 2/12 Rpt: 36/46	Turn Texas Blue PAC 00081055		
4 Date 06/20/2023	5 Payee name Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
05/30/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
05/22/2023	Frost Bank		
Amount (\$) \$15.00	Payee address;City;State;Zip CodeP.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Polling /- Gift/Awards/Memorials Expense Printin	Repayment/Reimbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District gExpense Travel Out of District us/Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 3/12 Rpt: 37/46	Turn Texas Blue PAC	00081055	
4 Date 05/15/2023	5 Payee name Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office s H	ought Office held	
Date	Payee name		
05/08/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip	Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296	_	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office s H	ought Office held	
Date	Payee name		
05/01/2023	Frost Bank		
Amount (\$) \$15.00	Payee address; City; State; Zip P.O. Box 1600	Code	
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office s H	ought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printin	Repayment/Reinbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District g Expense Travel Out of District ss/Wages/Contract Labor OTHER (enter a category not listed above)	se
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission F	ilers)
Sch: 4/12 Rpt: 38/46	Turn Texas Blue PAC	00081055	
4 Date	5 Payee name		
04/24/2023	Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Banking Fee	
		Banking rec	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office s H	ought Office held	
Date	Payee name		
04/17/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip	Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office s H	ought Office held	
Date	Payee name		
04/10/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip	Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office s H	ought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gitf/Awards/Memorials Expense Travel Out of District		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_	
Sch: 5/12 Rpt: 39/46	Turn Texas Blue PAC 00081055		
4 Date 04/03/2023	5 Payee name Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip Code	_	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H		
Date	Payee name		
03/27/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name	=	
03/20/2023	Frost Bank		
Amount (\$) \$15.00	Payee address; City; State; Zip Code P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H	_	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 6/12 Rpt: 40/46	Turn Texas Blue PAC 00081055		
4 Date 03/13/2023	5 Payee name Frost Bank		
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code P.O. Box 1600		
corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
03/06/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/27/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 7/12 Rpt: 41/46	Turn Texas Blue PAC 00081055		
4 Date 02/21/2023	5 Payee name Frost Bank		
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code P.O. Box 1600		
corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/13/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/06/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Pri	In Repayment/Reimbursement ce Overhead/Rental Expense ling Expense tring Expense aries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 8/12 Rpt: 42/46	Turn Texas Blue PAC	00081055	
4 Date	5 Payee name		
01/30/2023	Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zi	p Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Accounting/Banking) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
		Durining rec	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought Office held	
Date	Payee name		
01/23/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zi	p Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought Office held	
Date	Payee name		
01/17/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zi	n Code	
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 9/12 Rpt: 43/46	Turn Texas Blue PAC 00081055		
4 Date 01/09/2023	5 Payee name Frost Bank		
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code P.O. Box 1600		
corporate funds	San Antonio, TX 78296		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
01/03/2023	Frost Bank		
Amount (\$)	Payee address; City; State; Zip Code		
\$15.00	P.O. Box 1600		
Expenditure from corporate funds	San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fee 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
06/29/2023	MailChimp		
Amount (\$)	Payee address; City; State; Zip Code		
\$106.60	675 Ponce De Leon Avenue		
	Suite 5000		
Expenditure from corporate funds	Atlanta, GA 30308		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Web Services 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor		Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule	F1· 2 FILER NA	1F			3 Filer ID	(Ethics Commission Filers)
Sch: 10/12 Rpt: 44		as Blue PAC			00081055	(
4 Date	5 Payee nan	ne			•	
05/30/2023	MailChim	MailChimp				
6 Amount (\$)	7 Payee add	ress; City;	State; Zip C	ode		
\$106	.60 675 Ponc	e De Leon Avenue				
	Suite 500	0				
Expenditure from corporate funds	Atlanta, G	A 30308				
				1		
8 PURPOSE OF		(See Categories listed at the t	op of this schedule)	(b) Description		
EXPENDITURE	Advertisir	g Expense			outside of Texas. Com	
				Web Service	n, TX, officeholder living	expense
				Web Service	:5	
9 Complete <u>ONLY</u> if dir expenditure to benefit		fficeholder name	Office so	ught	Office he	ld
Date	Payee nan	ie				
05/01/2023	MailChim	0				
Amount (\$)	Payee add		State; Zip C	ode		
.,	-	-	State, Zip C	Jue		
\$106		e De Leon Avenue				
Expenditure from	Suite 500	0				
corporate funds	Atlanta, G	A 30308				
PURPOSE	(a) Category	(See Categories listed at the t	on of this schedule)	(b) Description		
OF		g Expense			outside of Texas. Com	plete Schedule T.
EXPENDITURE		5 — P		Check if Austir	n, TX, officeholder living	expense
				Web Service	S	
Complete ONLY if dir	ect Candidate/C	fficeholder name	Office so	Jaht	Office he	ld
expenditure to benefit				.9.10	0	
	i					
Date	Payee nan					
04/29/2023	MailChim	o				
Amount (\$)	Payee add	ress; City;	State; Zip C	ode		
\$234	.52 675 Ponc	e De Leon Avenue				
+=0						
Expenditure from	Suite 500					
corporate funds	Atlanta, G	A 30308				
PURPOSE	(a) Category	(See Categories listed at the t	op of this schedule)	(b) Description		
OF		g Expense	. ,	Check if travel	outside of Texas. Com	plete Schedule T.
EXPENDITURE					n, TX, officeholder living	expense
				Web Service	S	
Complete ONLY if dir	ect Candidate/C	fficeholder name	Office so	Jght	Office he	ld
expenditure to benefit				-		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Re Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	elated Expense	
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Con	nmission Filers)	
Sch: 11/12 Rpt: 45/46	Turn Texas Blue PAC00081055		
4 Date	5 Payee name		
03/15/2023	MailChimp		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$234.52	2 675 Ponce De Leon Avenue		
Expenditure from	Suite 5000		
corporate funds	Atlanta, GA 30308		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Web Services	т.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH		
Date	Payee name		
01/30/2023	MailChimp		
Amount (\$)	Payee address; City; State; Zip Code		
\$234.52	2 675 Ponce De Leon Avenue		
Expenditure from corporate funds	Suite 5000 Atlanta, GA 30308		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Web Services	т.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH		
Date	Payee name		
01/05/2023	The Rivas Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$250.00	1006 Banister Ln Apt 1001		
Expenditure from corporate funds	Austin, TX 78704		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Consulting	т.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 12/12 Rpt: 46/46	Turn Texas Blue PAC00081055		
4 Date	5 Payee name		
03/21/2023	The Rivas Group		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$150.00	1006 Banister Ln Apt 1001		
Expenditure from corporate funds	Austin, TX 78704		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.		
-	Consulting		
	Consulting		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
03/29/2023	The Rivas Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$150.00	1006 Banister Ln Apt 1001		
Expenditure from corporate funds	Austin, TX 78704		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting 		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Date	Payee name		
05/22/2023	The Rivas Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$40.00	1006 Banister Ln Apt 1001		
Expenditure from corporate funds	Austin, TX 78704		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		