

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00053715	<b>2</b> Total pages filed: 331
<b>3</b> COMMITTEE NAME Annie's List		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/17/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 303277  Austin, TX 78703		
	<b>5</b> CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Piper <hr/> NICKNAME LAST SUFFIX Stege Nelson		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave.  Austin, TX 78705		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave.  Austin, TX 78705		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (202) 812-0554		
<b>9</b> 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		
<b>10</b> PERIOD COVERED	Month Day Year      Month Day Year 01/01/2023      THROUGH      06/30/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year 04/06/2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Annie's List	<b>13 Filer ID</b> (Ethics Commission Filers) 00053715
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	The Honorable Melissa Cabello Havrda San Antonio City Council	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 196,906.77
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 2,367.62
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 189,174.56
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 109,750.84
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Piper Stege Nelson  
\_\_\_\_\_  
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

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
ADDENDUM

Page 3 of 331

<b>12 COMMITTEE NAME</b> Annie's List		<b>13 Filer ID</b> (Ethics Commission Filers) 00053715
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Janetta McCoy Taylor City Council
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	The Honorable Beck Elizabeth Fort Worth City Council
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Kimberlee Walter Mayor of Corsicana
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
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<b>17 COMMITTEE NAME</b> Annie's List		<b>18 Filer ID</b> (Ethics Commission Filers) 00053715
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 196,906.77
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	\$ 161,954.48
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 1,000.00
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 26,220.08
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/258 Rpt: 5/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aberly, Naomi D. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-6532	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer		<b>9</b> Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aberly, Suzanne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5543	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aberly, Suzanne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5543	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aberly, Suzanne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5543	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/258 Rpt: 6/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/258 Rpt: 7/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Albright, Alexandra Wilson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1021	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alderman, Doris <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78015-6533	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/258 Rpt: 8/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Wesley <hr/> Contributor address; City; State; Zip Code  Wimberley, TX 78676-1888	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/258 Rpt: 9/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alton, Sabrina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lakeway, TX 78734-5101	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) N/A - Homemaker		<b>9</b> Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alvarenga, Selena <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748-6557	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) District Court Judge		Employer (See Instructions)
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/258 Rpt: 10/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	<b>7</b> Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045-8206	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-4567	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Intern		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/258 Rpt: 11/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/258 Rpt: 12/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Auffill, Katheryne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79424-5763	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Auffill, Katheryne <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424-5763	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aulenbacher, Richard <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065-6442	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Auten, Ann <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002-1809	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/258 Rpt: 13/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Ann <hr/> Contributor address; City; State; Zip Code  Oaklyn, NJ 08107-1922	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/258 Rpt: 14/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Non-Profit Advocate		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Non-Profit Advocate		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Non-Profit Advocate		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Non-Profit Advocate		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Non-Profit Advocate		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/258 Rpt: 15/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78216-3520	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Non-Profit Advocate		<b>9</b> Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Lauren <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025-5067	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Digital		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Roy Edward <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-5116	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Thomas <hr/> Contributor address; City; State; Zip Code  Temple, TX 76502-2950	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ball, John <hr/> Contributor address; City; State; Zip Code  Mineola, TX 75773-5536	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Engineer/Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/258 Rpt: 16/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/258 Rpt: 17/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Banister, Simin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barber, Gary <hr/> Contributor address; City; State; Zip Code  Mays Landing, NJ 08330-1404	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barber, Gary <hr/> Contributor address; City; State; Zip Code  Mays Landing, NJ 08330-1404	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barber, Gary <hr/> Contributor address; City; State; Zip Code  Mays Landing, NJ 08330-1404	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barber, Gary <hr/> Contributor address; City; State; Zip Code  Mays Landing, NJ 08330-1404	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/258 Rpt: 18/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barberena, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78250-3206	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barnes, Anita W. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-7315	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barras, Donna <hr/> Contributor address; City; State; Zip Code  Dripping Springs, TX 78620-1718	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/258 Rpt: 19/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barzelay, Susan <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-4256	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bass, Marilee <hr/> Contributor address; City; State; Zip Code  Milwaukee, WI 53217-2325	Amount of Contribution (\$)  \$13.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/258 Rpt: 20/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batcheller, Joyce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-6432	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions)
Date 01/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Nancy Cozette <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Nancy Cozette <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Nancy Cozette <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Nancy Cozette <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/258 Rpt: 21/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Nancy Cozette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) educator		<b>9</b> Employer (See Instructions)
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/258 Rpt: 22/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Melissa <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5271	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Melissa <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Melissa <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/258 Rpt: 23/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Melissa <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5271	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$516.45
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/258 Rpt: 24/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> <b>6</b> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 21/258 Rpt: 25/331
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 06/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benavides, Tannya	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Laredo, TX 78040-2504	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bendele, Judith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Newport, KY 41071-2242	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bendele, Judith	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Newport, KY 41071-2242	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benson, Deanna	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Centerville, TX 75833-1176	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/258 Rpt: 26/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benson, Deanna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Centerville, TX 75833-1176	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berkman, Kathy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-2030	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bermea, Terry <hr/> Contributor address; City; State; Zip Code  Mission, TX 78573-1671	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beroza, Anne <hr/> Contributor address; City; State; Zip Code  Reno, NV 89511-8134	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bessent, Nancy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3242	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/258 Rpt: 27/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Birabil, Lorraine Burata	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75227-2707		
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Birabil, Lorraine Burata	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75227-2707		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Birabil, Lorraine Burata	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75227-2707		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709		
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709		
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/258 Rpt: 28/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Property Manager		<b>9</b> Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1709	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Lauren <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75208-3030	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/258 Rpt: 29/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Mary	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Sunset Valley, TX 78745-2638		
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Mary	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Sunset Valley, TX 78745-2638		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Mary	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Sunset Valley, TX 78745-2638		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Mary	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Sunset Valley, TX 78745-2638		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Mary	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Sunset Valley, TX 78745-2638		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/258 Rpt: 30/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blackson, Stephen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78750-2811	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired Landscape Designer		<b>9</b> Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blackson, Steve <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-2811	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Landscape Design		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions)
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions)
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/258 Rpt: 31/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Tax Examiner		<b>9</b> Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions)
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blau, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boddy, Diane <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2868	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonar, Ave <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-5521	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/258 Rpt: 32/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonilla, Eva <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-1950	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bradford, Lauryn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-1147	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Branaman, Tim <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brannon, Barry <hr/> Contributor address; City; State; Zip Code  Texas City, TX 77590-5416	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.) <hr/> Contributor address; City; State; Zip Code  Austin, TX 78736-3319	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/258 Rpt: 33/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78736-3319	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78736-3319	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78736-3319	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78736-3319	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braunagel-Brown, Mary A. (Dr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78736-3319	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/258 Rpt: 34/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, David	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Bainbridge Island, WA 98110-2949		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/258 Rpt: 35/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bray, Elizabeth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5378		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breiling, Annette	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  ljamsville, MD 21754-9033		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Denton, TX 76207-1288		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Denton, TX 76207-1288		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/258 Rpt: 36/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207-1288	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207-1288	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207-1288	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brewer, Angela <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207-1288	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Briggs, Sydney <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-5809	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Research Scientist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/258 Rpt: 37/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bromley, Ernest W.	<b>7</b> Amount of Contribution (\$)  \$1,032.70
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78212		
<b>8</b> Principal occupation / Job title (See Instructions) Advertising Executive		<b>9</b> Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bronstein, Dale	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76112-5425		
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions)
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bronstein, Dale	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76112-5425		
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions)
Date 01/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Austin, TX 78702-4587		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Austin, TX 78702-4587		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/258 Rpt: 38/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Royce <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryan, Helen Lacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-2906	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/258 Rpt: 39/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullard, Becky <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2337	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Partner		<b>9</b> Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullard, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullock, Jan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-2219	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullock, Jan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-2219	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdett, Linda <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624-3233	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/258 Rpt: 40/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Policy manager		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/258 Rpt: 41/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burlage, Rachel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76210-8054	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Policy manager		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burnett, Terrell <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byrne, Darlene <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-1315	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calvert, Lindsay G. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057-3734	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calvert, Lindsay G. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057-3734	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/258 Rpt: 42/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calvert, Lindsay G. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057-3734	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Campaign, Becca DeFelice <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-0853	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cantrell, Rebecca <hr/> Contributor address; City; State; Zip Code  Jasper, GA 30143-3260	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canup, James <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-2842	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canup, James <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-2842	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/258 Rpt: 43/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capshaw, Josephine	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074-3612		
<b>8</b> Principal occupation / Job title (See Instructions) Substitute Teacher		<b>9</b> Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  San Antonio, TX 78251-4027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77098-4215		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77098-4215		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77098-4215		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/258 Rpt: 44/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-4215	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4215	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardnel, Elisa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4215	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Karen Marjorie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748-1338	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Accountant/Treas.		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Thomas <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78245-3521	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/258 Rpt: 45/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) psychotherapist		<b>9</b> Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions)
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/258 Rpt: 46/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cartwright, Mary Dorsey <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) psychotherapist		<b>9</b> Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Casey, Kristen <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78204-1412	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cason, Marion <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78006-3559	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) farm owner		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/258 Rpt: 47/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Deputy Administrator		<b>9</b> Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3011	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cemo, Jason <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-1531	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/258 Rpt: 48/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chamberlain, Caroline <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3011	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) IT program manager		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Melissa <hr/> Contributor address; City; State; Zip Code  Austin, TX 78722-1815	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director of Member Experience		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Ron <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85014-2343	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Ron <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85014-2343	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Ron <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85014-2343	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/258 Rpt: 49/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Ron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Phoenix, AZ 85014-2343	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Ron <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85014-2343	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Charin, Katherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758-5355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions)
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/258 Rpt: 50/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chasteen, Rachel <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-5535	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/258 Rpt: 51/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Senior Director		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/258 Rpt: 52/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chavez, Gina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78753-4441	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2345	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2345	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2345	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2345	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/258 Rpt: 53/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/258 Rpt: 54/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiarito, Bebe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clardy, Thelma Sanders <hr/> Contributor address; City; State; Zip Code  Desoto, TX 75115-3519	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/258 Rpt: 55/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/258 Rpt: 56/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$5.00</span>
<b>6</b> Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger	Amount of Contribution (\$) <span style="float:right">\$5.00</span>
Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger	Amount of Contribution (\$) <span style="float:right">\$5.00</span>
Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Roger	Amount of Contribution (\$) <span style="float:right">\$5.00</span>
Contributor address; City; State; Zip Code  Bellingham, WA 98225-6213		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clarke, Margot	Amount of Contribution (\$) <span style="float:right">\$1,000.00</span>
Contributor address; City; State; Zip Code  Austin, TX 78731-5420		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/258 Rpt: 57/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Colombo, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023-2350	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Condon, Jane <hr/> Contributor address; City; State; Zip Code  Greenwich, CT 06831-2722	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) comedian		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland, Harold <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263-1145	Amount of Contribution (\$)  \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cosgriff, Gabrielle <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-1532	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costello, Patricia <hr/> Contributor address; City; State; Zip Code  South Padre Island, TX 78597-7507	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/258 Rpt: 58/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/258 Rpt: 59/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottrell, John	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75041-3325		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cowan, Eleanor	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Georgetown, TX 78628-7276		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/258 Rpt: 60/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
<b>8</b> Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		<b>9</b> Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craig, Leilani	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Portland, OR 97201-3371		
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Creuzot, John	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75218-4404		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/258 Rpt: 61/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crow, Kathy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-1104	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/258 Rpt: 62/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda Margarita <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79416-3034	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Deputy Voter Protection Director		<b>9</b> Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cunningham, Sharon <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-2037	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cusick, Alenore <hr/> Contributor address; City; State; Zip Code  Glenmont, NY 12077-3617	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DUNLAP, DEBORAH <hr/> Contributor address; City; State; Zip Code  Marble Falls, TX 78654-1384	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dale, Judith <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-7125	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/258 Rpt: 63/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Nurse practitioner		<b>9</b> Employer (See Instructions)
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/258 Rpt: 64/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Nurse practitioner		<b>9</b> Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/258 Rpt: 65/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Nurse practitioner		<b>9</b> Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dauerty, Barbara <hr/> Contributor address; City; State; Zip Code  Universal City, TX 78148-2806	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician associate		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78733-1503	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Vickie <hr/> Contributor address; City; State; Zip Code  Friendswood, TX 77546-5516	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/258 Rpt: 66/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis Jr, Donald G <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-6008	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dawson, Leslie H <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6745	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/258 Rpt: 67/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/258 Rpt: 68/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-3009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/258 Rpt: 69/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751-3009		
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/258 Rpt: 70/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bertram, TX 78605	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> Contributor address; City; State; Zip Code  Bertram, TX 78605	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> Contributor address; City; State; Zip Code  Bertram, TX 78605	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> Contributor address; City; State; Zip Code  Bertram, TX 78605	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> Contributor address; City; State; Zip Code  Bertram, TX 78605	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/258 Rpt: 71/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dearmont, Marjorie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bertram, TX 78605	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deel, Sandra <hr/> Contributor address; City; State; Zip Code  Rockwall, TX 75087-7237	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/258 Rpt: 72/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dell, Marci <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code  Texas City, TX 77591-7000	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/258 Rpt: 73/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dibrell, Lauri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Texas City, TX 77591-7000	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code  Texas City, TX 77591-7000	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code  Texas City, TX 77591-7000	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickerson, Charlotte <hr/> Contributor address; City; State; Zip Code  Paradise, TX 76073-4052	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diehl, Nancy S. <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78210-1266	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/258 Rpt: 74/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dixon, Joyce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75372-1057	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Operations		<b>9</b> Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dobson, Lynne <hr/> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-5341	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dollive, Patricia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4347	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dudley, Jaquelin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-8025	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunning, Sally Hawley <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-2227	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/258 Rpt: 75/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duval, Deb <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78733-1503	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00297572</u> ) EMILY's List <hr/> Contributor address; City; State; Zip Code  Washington, DC 20036-3949	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) EYRING, MARTHA C. <hr/> Contributor address; City; State; Zip Code  Katy, TX 77494-1993	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eckhardt, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4828	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Senator		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/258 Rpt: 76/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ecklund, Jenny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/258 Rpt: 77/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Effinger, Raymond <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ossining, NY 10562-5999	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Educator		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elder, Roxanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78755-6179	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eldridge, Jodie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-1502	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director of Resource Development		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott-Smart, Patricia <hr/> Contributor address; City; State; Zip Code  Abilene, TX 79605-4916	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott-Smart, Patricia <hr/> Contributor address; City; State; Zip Code  Abilene, TX 79605-4916	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/258 Rpt: 78/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott-Smart, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Abilene, TX 79605-4916	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott-Smart, Patricia <hr/> Contributor address; City; State; Zip Code  Abilene, TX 79605-4916	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellis, Mary <hr/> Contributor address; City; State; Zip Code  Rosston, TX 76263	Amount of Contribution (\$)  \$58.25
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions)
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/258 Rpt: 79/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy Adams <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Chef		<b>9</b> Employer (See Instructions)
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy Adams <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy Adams <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Quincy Adams <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-5160	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erminger, Charles <hr/> Contributor address; City; State; Zip Code  Kingwood, TX 77345-5491	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/258 Rpt: 80/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analyse <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) White house liaison		<b>9</b> Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analyse <hr/> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analyse <hr/> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analyse <hr/> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analyse <hr/> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/258 Rpt: 81/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escobar, Analysse <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20002-7373	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) White house liaison		<b>9</b> Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Esherick, Lisa <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94703-1904	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eskow & Eskow Domel, Lisa & Max <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-7359	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-3540	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-3540	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/258 Rpt: 82/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Evbagharu, Odus <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77224-9612	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Everett, Betty J <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76012-2757	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Everhart, Amy & Ian Davis <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-1608	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/258 Rpt: 83/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> <b>6</b> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Heather <hr/> Contributor address; City; State; Zip Code  Center Point, TX 78010-3503	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farquhar, John <hr/> Contributor address; City; State; Zip Code  Plantation, FL 33317-3331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/258 Rpt: 84/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Paris, TX 75462		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/258 Rpt: 85/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fenner, Edward <hr/> <b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76010-4228	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fierro-Perez, Rocio <hr/> Contributor address; City; State; Zip Code  Austin, TX 78744-7965	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Political Coordinator		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fife, Doris <hr/> Contributor address; City; State; Zip Code  Reisterstown, MD 21136-6512	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fikes, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-3103	Amount of Contribution (\$)  \$80,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisk, Raymond <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666-4927	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/258 Rpt: 86/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 02/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/258 Rpt: 87/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Susan <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-4911	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/258 Rpt: 88/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080-4911	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flores, Jasmin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75224-1053	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/258 Rpt: 89/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fondren, Kimberly <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22301-1104	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Law enforcement		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fondren, Kimberly <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22301-1104	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Law enforcement		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/258 Rpt: 90/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foote, Sharon <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78230-3855	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fortier, Adoneca <hr/> Contributor address; City; State; Zip Code  Houston, TX 77080-2904	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/258 Rpt: 91/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/258 Rpt: 92/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/258 Rpt: 93/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> <b>6</b> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/258 Rpt: 94/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Helotes, TX 78023-4168		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowles, Nicole	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Helotes, TX 78023-4168		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Francell, Beth	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Fort Davis, TX 79734-2176		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/258 Rpt: 95/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freer, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/258 Rpt: 96/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Furlong, Alexandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-5206	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/258 Rpt: 97/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GAUL, MALINDA <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-2165	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galanter, Laura <hr/> Contributor address; City; State; Zip Code  Washington, DC 20003-3788	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galo, Alma <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-3953	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/258 Rpt: 98/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garber, Martha <hr/> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/258 Rpt: 99/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Donor Services		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/258 Rpt: 100/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Danna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Donor Services		<b>9</b> Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Norma <hr/> Contributor address; City; State; Zip Code  Donna, TX 78537-1073	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia Hernandez, Cassandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75202-4318	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/15/2023	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 75231-2215	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, June <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-1611	Amount of Contribution (\$)  \$103.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/258 Rpt: 101/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Maria <hr/> <b>6</b> Contributor address; City; State; Zip Code  Alton, TX 78573-1032	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Maria <hr/> Contributor address; City; State; Zip Code  Alton, TX 78573-1032	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Maria <hr/> Contributor address; City; State; Zip Code  Alton, TX 78573-1032	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gass, Ellen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78716-2481	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Nonprofit Conservation		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gass, Ellen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78716-2481	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Nonprofit Conservation		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/258 Rpt: 102/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/258 Rpt: 103/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/258 Rpt: 104/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gentry, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1962	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) George, Cheryl <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-5193	Amount of Contribution (\$)  \$516.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) George, Renee Will <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-5105	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gerbracht, Heidi L. <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-2238	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) nonprofit professional		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gillespie, Roslyn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3821	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/258 Rpt: 105/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilstrap, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-1201	<b>7</b> Amount of Contribution (\$)  \$39.40
<b>8</b> Principal occupation / Job title (See Instructions) Finance Manager		<b>9</b> Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glast, Rachel <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-7541	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Fundraiser		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/258 Rpt: 106/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Retail		<b>9</b> Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-4109	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gomez, Cristina <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-0003	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions)
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gomez, Cristina <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-0003	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/258 Rpt: 107/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gomez, Cristina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-0003	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) consultant		<b>9</b> Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gomez, Diana <hr/> Contributor address; City; State; Zip Code  Kyle, TX 78640-0581	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Deputy District Director		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzales, Stephanie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78727-1318	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gradford, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78744-4813	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gradford, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78744-4813	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/258 Rpt: 108/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20008-5112		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/258 Rpt: 109/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Zina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20008-5112	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/258 Rpt: 110/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Lecturer		<b>9</b> Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenfield, Stuart <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	Amount of Contribution (\$)  \$36.34
Principal occupation / Job title (See Instructions) Senior Production Manager		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	Amount of Contribution (\$)  \$36.34
Principal occupation / Job title (See Instructions) Senior Production Manager		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	Amount of Contribution (\$)  \$36.34
Principal occupation / Job title (See Instructions) Senior Production Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/258 Rpt: 111/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	<b>7</b> Amount of Contribution (\$)  \$36.34
<b>8</b> Principal occupation / Job title (See Instructions) Senior Production Manager		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	Amount of Contribution (\$)  \$36.34
Principal occupation / Job title (See Instructions) Senior Production Manager		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Dawn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3641	Amount of Contribution (\$)  \$36.34
Principal occupation / Job title (See Instructions) Senior Production Manager		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grissom, Joene <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-4145	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gross, Gary <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701-8654	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/258 Rpt: 112/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groves, Debra M	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751-4215		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guefen, Dana	Amount of Contribution (\$)  \$103.45
Contributor address; City; State; Zip Code  Galveston, TX 77550-5113		
Principal occupation / Job title (See Instructions) activist Law student		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Greg	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Pharr, TX 78577-6233		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Sarah	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Linda	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78759-3968		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 109/258 Rpt: 113/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hampton, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hampton, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hampton, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hampton, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hampton, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/258 Rpt: 114/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanks, Kendyl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanks, Kendyl <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanks, Kendyl <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanks, Kendyl <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanks, Kendyl <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/258 Rpt: 115/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanks, Kendyl	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3624		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargrove, Mary	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78759-7917		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harman, Judith L.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76109-1153		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Lis	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Houston, TX 77030-2028		
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Lis	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Houston, TX 77030-2028		
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 112/258 Rpt: 116/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Lis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77030-2028	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Senior Client and Project Manager		<b>9</b> Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Lis <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-2028	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Lis <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-2028	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Lis <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-2028	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Lizza <hr/> Contributor address; City; State; Zip Code  Volente, TX 78641-9675	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Communications Strategy Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/258 Rpt: 117/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hausman, Alan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-2239	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
<b>Date</b> 05/04/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haynes, William <hr/> <b>Contributor address; City; State; Zip Code</b>  Del Rio, TX 78840-2414	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b>
<b>Date</b> 06/15/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heard, Marilyn <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75225-1739	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Senior Research Nurse		<b>Employer (See Instructions)</b>
<b>Date</b> 04/30/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75230-2240	<b>Amount of Contribution (\$)</b>  \$10.00
<b>Principal occupation / Job title (See Instructions)</b> RN LMSW		<b>Employer (See Instructions)</b>
<b>Date</b> 05/14/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75230-2240	<b>Amount of Contribution (\$)</b>  \$10.00
<b>Principal occupation / Job title (See Instructions)</b> RN LMSW		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 114/258 Rpt: 118/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Denise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78747-4119	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Judge		<b>9</b> Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Laura <hr/> Contributor address; City; State; Zip Code  Austin, TX 78730-4214	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Laura <hr/> Contributor address; City; State; Zip Code  Austin, TX 78730-4214	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez Holmes, Laura Nicole <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-3748	Amount of Contribution (\$)  \$103.45
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/258 Rpt: 119/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		<b>9</b> Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernholm, Cameron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/258 Rpt: 120/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Tina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78737-3124	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hield, Melissa <hr/> Contributor address; City; State; Zip Code  Austin, TX 78752-1425	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hileman, Helen <hr/> Contributor address; City; State; Zip Code  Eaton, OH 45320-2277	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillman, Cheryl L <hr/> Contributor address; City; State; Zip Code  Bryan, TX 77808-9222	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/258 Rpt: 121/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	<b>7</b> Amount of Contribution (\$)  \$45.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Adam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/258 Rpt: 122/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holmes, Paulette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77020-2642	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 01/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/258 Rpt: 123/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	<b>7</b> Amount of Contribution (\$)  \$18.00
<b>8</b> Principal occupation / Job title (See Instructions) systems & data analyst		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 05/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holzer, Jean <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/258 Rpt: 124/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horak, Ann <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79902-2614	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horak, Ann <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902-2614	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horak, Ann <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902-2614	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horick, Robert <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628-3356	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houlihan, Serena <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008-3819	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retail Executive		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 121/258 Rpt: 125/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houlihan, Serena <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008-3819	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retail Executive		<b>9</b> Employer (See Instructions)
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/258 Rpt: 126/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huerta, Joseph <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413-2704	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hundley, Betty <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3307	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) legal marketing consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/258 Rpt: 127/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) legal marketing consultant		<b>9</b> Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) legal marketing consultant		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) legal marketing consultant		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) legal marketing consultant		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5048	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) legal marketing consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 124/258 Rpt: 128/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ingram, Margaret <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-4907	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Israel, Celia Marie (Rep.) <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-2910	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Sharon Jackson <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-2052	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Sharon Jackson <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-2052	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James, Marge <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-2550	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/258 Rpt: 129/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janosky, Edward	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Bryan, TX 77802-1946		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janosky, Edward	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-1946		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janosky, Edward	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-1946		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janosky, Edward	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-1946		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jenkins, Joan	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Wimberley, TX 78676-5201		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 126/258 Rpt: 130/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jenkins, Joan F.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Wimberley, TX 78676-5201	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jewell, Beth	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78736-1742	
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  New York, NY 10001-6261	
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  New York, NY 10001-6261	
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  New York, NY 10001-6261	
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/258 Rpt: 131/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10001-6261	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) literary agent		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer <hr/> Contributor address; City; State; Zip Code  New York, NY 10001-6261	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson-Blalock, Jennifer <hr/> Contributor address; City; State; Zip Code  New York, NY 10001-6261	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Ann R <hr/> Contributor address; City; State; Zip Code  Leverett, MA 01054-9580	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Ann R <hr/> Contributor address; City; State; Zip Code  Leverett, MA 01054-9580	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/258 Rpt: 132/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Ann R <hr/> <b>6</b> Contributor address; City; State; Zip Code  Leverett, MA 01054-9580	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Bobbi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3119	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Lynne <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-4313	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Lynne <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-4313	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Maurine <hr/> Contributor address; City; State; Zip Code  Tallahassee, FL 32308-7900	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/258 Rpt: 133/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Maurine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tallahassee, FL 32308-7900	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Sandra <hr/> Contributor address; City; State; Zip Code  Mapleton, IL 61547-9216	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jordan, Janet <hr/> Contributor address; City; State; Zip Code  Duncanville, TX 75137-4525	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/258 Rpt: 134/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kahn, James <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-2629	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 131/258 Rpt: 135/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Program coordinator		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 132/258 Rpt: 136/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karempudi, Sahiti <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-5313	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Program coordinator		<b>9</b> Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 133/258 Rpt: 137/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126		
<b>8</b> Principal occupation / Job title (See Instructions) Clinical Social Worker		<b>9</b> Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126		
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keilin, Sharon	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Llano, TX 78643-3580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kenton, John	Amount of Contribution (\$)  \$3.00
Contributor address; City; State; Zip Code  San Antonio, TX 78239-3097		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77292-0720		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 134/258 Rpt: 138/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/258 Rpt: 139/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Sally A <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75206-7936	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirkland, Joseph <hr/> Contributor address; City; State; Zip Code  Huntsville, TX 77340	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) College Professor (retired)		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kline, Kristin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1570	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koli, Anuradha <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-0005	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kolodzey, Kelly <hr/> Contributor address; City; State; Zip Code  Buda, TX 78610-3156	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/258 Rpt: 140/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kolodzey, Stanley	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Buda, TX 78610-2878		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LEE III, DAN HENRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Dallas, TX 75209-3311		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78704-2412		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78704-2412		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78704-2412		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/258 Rpt: 141/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 138/258 Rpt: 142/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/258 Rpt: 143/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 140/258 Rpt: 144/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMore, Jerome <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78728-4765	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMore, Jerome <hr/> Contributor address; City; State; Zip Code  Austin, TX 78728-4765	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMore, Jerome <hr/> Contributor address; City; State; Zip Code  Austin, TX 78728-4765	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMore, Jerome <hr/> Contributor address; City; State; Zip Code  Austin, TX 78728-4765	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lambert, Ruth <hr/> Contributor address; City; State; Zip Code  Melbourne, FL 32940-6815	Amount of Contribution (\$)  \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 141/258 Rpt: 145/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lambert, Ruth	<b>7</b> Amount of Contribution (\$) \$22.00
<b>6</b> Contributor address; City; State; Zip Code  Melbourne, FL 32940-6815		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lambert, Ruth	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code  Melbourne, FL 32940-6815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lambert, Ruth	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code  Melbourne, FL 32940-6815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laufer, Judith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78232-2510		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laufer, Judith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78232-2510		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/258 Rpt: 146/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laufer, Judith <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78232-2510	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laufer, Judith <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-2510	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/258 Rpt: 147/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/258 Rpt: 148/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/258 Rpt: 149/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	<b>7</b> Amount of Contribution (\$)  \$6.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Le, Mai <hr/> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/258 Rpt: 150/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LeMelle, Pamela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tamarac, FL 33321-2994	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leak, Erica <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-4013	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78213-2022	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, Michael <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95120-2232	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/258 Rpt: 151/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/258 Rpt: 152/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leff, Debra S <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78756-3525	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code  Katy, TX 77449-7504	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code  Katy, TX 77449-7504	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 149/258 Rpt: 153/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Homemaker		<b>9</b> Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lerner, Elizabeth Arend <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5424	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 150/258 Rpt: 154/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 151/258 Rpt: 155/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lessig, Sandy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025-3059	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipkowitz, Brenda <hr/> Contributor address; City; State; Zip Code  College Park, MD 20740-2852	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Little, Emily <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-3248	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Logsdon, Deborah <hr/> Contributor address; City; State; Zip Code  Selma, TX 78154-3413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-8001	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/258 Rpt: 156/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-8001	
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/22/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S.	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77024-8001	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b>
<b>Date</b> 04/22/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S.	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77024-8001	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b>
<b>Date</b> 05/22/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S.	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77024-8001	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b>
<b>Date</b> 06/22/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S.	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77024-8001	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/258 Rpt: 157/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowery, Sandra S. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-8001	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/258 Rpt: 158/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luna, Sarah <hr/> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3415	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luna, Sarah <hr/> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3415	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/258 Rpt: 159/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luna, Sarah	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3415		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luna, Sarah	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3415		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lynch, Nancy	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-4402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lynch, Nancy N	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-4402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lynch, Nancy N	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-4402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/258 Rpt: 160/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Macalik, Allison <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75208-0166	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Solution Engineer		<b>9</b> Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 157/258 Rpt: 161/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maddox, Samira <hr/> Contributor address; City; State; Zip Code  Allen, TX 75013-4613	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marks, Marty <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-4757	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marks, Marty <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-4757	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 158/258 Rpt: 162/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marks, Marty <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75240-4757	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Susie <hr/> Contributor address; City; State; Zip Code  Plano, TX 75093-5937	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/258 Rpt: 163/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Zoe <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6693	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Carroll <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-5573	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/258 Rpt: 164/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/258 Rpt: 165/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Michael	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-4255		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Pam	Amount of Contribution (\$)  \$30.00
Contributor address; City; State; Zip Code  Austin, TX 78756-3017		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Spencer	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Spencer	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Spencer	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/258 Rpt: 166/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Spencer	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Spencer	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Spencer	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77084-4312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 163/258 Rpt: 167/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	<b>7</b> Amount of Contribution (\$)  \$7.00
<b>6</b> Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
<b>8</b> Principal occupation / Job title (See Instructions) Management consultant		<b>9</b> Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	Amount of Contribution (\$)  \$7.00
Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	Amount of Contribution (\$)  \$7.00
Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayo, Donna	Amount of Contribution (\$)  \$7.00
Contributor address; City; State; Zip Code  Belmont, MA 02478-1947		
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 164/258 Rpt: 168/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 06/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazzo, Carolyn <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-2956	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 165/258 Rpt: 169/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnelly, Elaine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cypress, TX 77433-3778	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McColloch, S. Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5249	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McColloch, S. Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5249	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McColloch, S. Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5249	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McColloch, S. Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5249	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 166/258 Rpt: 170/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McColloch, S. Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75206-5249	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/258 Rpt: 171/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McElroy, Jim <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2525	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/258 Rpt: 172/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/258 Rpt: 173/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McIlheran, Sarah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) physical therapist		<b>9</b> Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/258 Rpt: 174/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Photographer		<b>9</b> Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinley, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77043-4718	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 171/258 Rpt: 175/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McLaughlin, Cassandra (Kassie) G. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75208-3128	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McMinn, Susie <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-3000	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McMinn, Susie <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-3000	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNew, Patricia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-1626	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McReynolds, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2429	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/258 Rpt: 176/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medford, Curtis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201-1216	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 173/258 Rpt: 177/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mercano, Christine <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77399-1071	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Metoyer, Vernita <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433-2042	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Owner/Proprietress		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Metoyer, Vernita <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433-2042	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Owner/Proprietress		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 174/258 Rpt: 178/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Lynn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78752-3333	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Lynn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78752-3333	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Melanie B <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748-3918	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Melanie B <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748-3918	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Milo, Angela <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3803	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Graphic designer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/258 Rpt: 179/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mireles, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Alton, TX 78573-1192	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Election Protection Coordinator		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, John <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756-2203	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Tara <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78681-4063	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moir, Alex <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758-6030	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 176/258 Rpt: 180/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monahan, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2429	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 177/258 Rpt: 181/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monjure, Noel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cypress, TX 77429-5339	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montoya, Celina <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5185	Amount of Contribution (\$)  \$1,032.70
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montoya, Celina <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5185	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Henry <hr/> Contributor address; City; State; Zip Code  Austin, TX 78736-7517	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morff, Diana <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78247-3351	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/258 Rpt: 182/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moriarty, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78213-2625	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed Consultant		<b>9</b> Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Independent Contractor		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Independent Contractor		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Independent Contractor		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Independent Contractor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 179/258 Rpt: 183/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Independent Contractor		<b>9</b> Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-3839	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Independent Contractor		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Karen <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76116-8156	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Naishtat, Elliott <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2752	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Naranjo, Katie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-3933	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/258 Rpt: 184/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Piper Stege <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaverton, OR 97008-7105	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Unemployed		<b>9</b> Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Piper Stege <hr/> Contributor address; City; State; Zip Code  Beaverton, OR 97008-7105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Piper Stege <hr/> Contributor address; City; State; Zip Code  Beaverton, OR 97008-7105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Piper Stege <hr/> Contributor address; City; State; Zip Code  Beaverton, OR 97008-7105	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newman, Beth <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-4453	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) College professor		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 181/258 Rpt: 185/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Holly	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252-2738		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Niekamp, Pat	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Austin, TX 78749-4119		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nikolatos, John	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  San Antonio, TX 78228-2003		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nisenbaum, Miriam	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nisenbaum, Miriam	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/258 Rpt: 186/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noakes, Fran <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182-3456	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Shannon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Shannon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Shannon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Shannon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 183/258 Rpt: 187/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Shannon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78735-6605	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noll, Katherine Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-3403	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) H. R. Director		Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nunez Cohen, Christina <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02144-3132	Amount of Contribution (\$)  \$85.00
Principal occupation / Job title (See Instructions) Federal and Initiatives Manager		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nunez Cohen, Christina <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02144-3132	Amount of Contribution (\$)  \$85.00
Principal occupation / Job title (See Instructions) Federal and Initiatives Manager		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nunez Cohen, Christina <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02144-3132	Amount of Contribution (\$)  \$85.00
Principal occupation / Job title (See Instructions) Federal and Initiatives Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/258 Rpt: 188/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neill, Cathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-1482	<b>7</b> Amount of Contribution (\$)  \$5,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Author		<b>9</b> Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ONEAL, BARBARA <hr/> Contributor address; City; State; Zip Code  Waco, TX 76708-5435	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ONEAL, BARBARA <hr/> Contributor address; City; State; Zip Code  Waco, TX 76708-5435	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olivarez, Javier <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75217-3767	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Onderlinde, William <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78245-3031	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Laborer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/258 Rpt: 189/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oneal, Claire <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78744-7802	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Padilla, Estela <hr/> Contributor address; City; State; Zip Code  Socorro, TX 79927-1623	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Padilla, Estela <hr/> Contributor address; City; State; Zip Code  Socorro, TX 79927-1623	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Painter Jr, Dean A <hr/> Contributor address; City; State; Zip Code  Rancho Mirage, CA 92270-3349	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Painter Jr, Dean A <hr/> Contributor address; City; State; Zip Code  Rancho Mirage, CA 92270-3349	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/258 Rpt: 190/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78248-4552	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Leslie <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78248-4552	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Leslie <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78248-4552	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Leslie <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78248-4552	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parken, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-1244	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/258 Rpt: 191/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parken, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-1244	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)
Date 02/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 188/258 Rpt: 192/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Real estate broker		<b>9</b> Employer (See Instructions)
Date 06/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peacock, Allie <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-7049	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Pamela <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-1805	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M. <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Local Government Relations		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/258 Rpt: 193/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	
<b>8</b> Principal occupation / Job title (See Instructions) Local Government Relations		<b>9</b> Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	
Principal occupation / Job title (See Instructions) Local Government Relations		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	
Principal occupation / Job title (See Instructions) Local Government Relations		Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	
Principal occupation / Job title (See Instructions) Local Government Relations		Employer (See Instructions)
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	
Principal occupation / Job title (See Instructions) Local Government Relations		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 190/258 Rpt: 194/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelayo, Yvonne M. <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78258-1610	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Local Government Relations		<b>9</b> Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 191/258 Rpt: 195/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Laura <hr/> Contributor address; City; State; Zip Code  Brownsville, TX 78520-8111	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penridge, Eleanor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78738-7619	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peoples, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-1055	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 01/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 192/258 Rpt: 196/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727		
<b>8</b> Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		<b>9</b> Employer (See Instructions)
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 193/258 Rpt: 197/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pinnelli, Janis W <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78763-0038	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pique, Lynn <hr/> Contributor address; City; State; Zip Code  Redwood City, CA 94063-1036	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pique, Lynn <hr/> Contributor address; City; State; Zip Code  Redwood City, CA 94063-1036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poer, Marianne <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077-7114	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 194/258 Rpt: 198/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 03/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polito, Catherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 195/258 Rpt: 199/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poquet, Christine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024-3031	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) TEACHER		<b>9</b> Employer (See Instructions)
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Proffitt, James <hr/> Contributor address; City; State; Zip Code  McCloud, CA 96057-0490	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pullen, Cheryl <hr/> Contributor address; City; State; Zip Code  Shepherdstown, WV 25443-1608	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Qadri, Zohaib <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-0046	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROWAN, PATRICIA <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3801	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 196/258 Rpt: 200/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROWAN, PATRICIA <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-3801	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROWAN, PATRICIA <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3801	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROWAN, PATRICIA <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3801	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Senior Business Analyst		Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Senior Business Analyst		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 197/258 Rpt: 201/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	<b>7</b> Amount of Contribution (\$)  \$7.00
<b>8</b> Principal occupation / Job title (See Instructions) Senior Business Analyst		<b>9</b> Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Senior Business Analyst		Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Senior Business Analyst		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Monica <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Senior Business Analyst		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramon, Ricardo <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4761	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Senior Risk Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 198/258 Rpt: 202/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Finance		<b>9</b> Employer (See Instructions)
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 199/258 Rpt: 203/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rassadi, Yasmin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-6123	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Finance		<b>9</b> Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Recar, Teresa <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6604	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeder, Dotti <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 200/258 Rpt: 204/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Regalado, Maria <hr/> Contributor address; City; State; Zip Code  Pharr, TX 78577-5214	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 201/258 Rpt: 205/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096-4835		
<b>8</b> Principal occupation / Job title (See Instructions) Fundraiser Attorney		<b>9</b> Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4835		
Principal occupation / Job title (See Instructions) Fundraiser Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4835		
Principal occupation / Job title (See Instructions) Fundraiser Attorney		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4835		
Principal occupation / Job title (See Instructions) Fundraiser Attorney		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4835		
Principal occupation / Job title (See Instructions) Fundraiser Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 202/258 Rpt: 206/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ribnick-Kleiman, Amelia H <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096-4835	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Fundraiser Attorney		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Ellen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-1614	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 203/258 Rpt: 207/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) none		<b>9</b> Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rider, Kathy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6221	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Meghan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78745-2082	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 204/258 Rpt: 208/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika	<b>7</b> Amount of Contribution (\$) \$20.85
<b>6</b> Contributor address; City; State; Zip Code  Glendale, CA 91205-3564		
<b>8</b> Principal occupation / Job title (See Instructions) Editor		<b>9</b> Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code  Glendale, CA 91205-3564		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code  Glendale, CA 91205-3564		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code  Glendale, CA 91205-3564		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika	Amount of Contribution (\$) \$20.85
Contributor address; City; State; Zip Code  Glendale, CA 91205-3564		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 205/258 Rpt: 209/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Erika <hr/> <b>6</b> Contributor address; City; State; Zip Code  Glendale, CA 91205-3564	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Editor		<b>9</b> Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Jacqueline <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78202-1950	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Jacqueline <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78202-1950	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Rebecca L <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664-3987	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Systems Analyst		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Enid <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056-3282	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 206/258 Rpt: 210/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Enid <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77056-3282	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 207/258 Rpt: 211/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jean ..... <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Sally ..... Contributor address; City; State; Zip Code  Galveston, TX 77550-5063	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robison, Johnny ..... Contributor address; City; State; Zip Code  Arlington, TX 76013-2322	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robison, Johnny ..... Contributor address; City; State; Zip Code  Arlington, TX 76013-2322	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther ..... Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 208/258 Rpt: 212/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) physician		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 209/258 Rpt: 213/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79925-5503	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Lobbyist		<b>9</b> Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rood, Magdalena <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3151	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rood, Magdalena <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3151	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77268	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77268	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 210/258 Rpt: 214/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77268	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Real estate mgmt		<b>9</b> Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77268	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)
Date 05/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77268	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77268	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Joel <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701-5337	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 211/258 Rpt: 215/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rothardt, Brigid <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093-7150	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) REGISTERED NURSE		<b>9</b> Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salky, Alma <hr/> Contributor address; City; State; Zip Code  Snowmass Village, CO 81615-6543	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sallee, Shelley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-4703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 212/258 Rpt: 216/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Samandari, Sudy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Richard <hr/> Contributor address; City; State; Zip Code  Leakey, TX 78873-0835	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 213/258 Rpt: 217/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Researcher		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 214/258 Rpt: 218/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarath, Patrice	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-3036		
<b>8</b> Principal occupation / Job title (See Instructions) Researcher		<b>9</b> Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sashkin, Davina	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78739-2022		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saville, Linda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77056-3697		
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions)
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schechter, Lillie Jane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77019-4329		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schechter, Lillie Jane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77019-4329		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 215/258 Rpt: 219/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schechter, Lillie Jane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-4329	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schechter, Lillie Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-4329	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schechter, Lillie Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-4329	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scheiber, Yvette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77407-0846	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schelling, Emmett <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Exec Dir		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 216/258 Rpt: 220/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 217/258 Rpt: 221/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnur, Tatiana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-4203	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seaman, William <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-4328	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 218/258 Rpt: 222/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions)
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sells, Greg K <hr/> Contributor address; City; State; Zip Code  Austin, TX 78741-6942	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Internal Revenue Service		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sells, Greg K <hr/> Contributor address; City; State; Zip Code  Austin, TX 78741-6942	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Internal Revenue Service		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 219/258 Rpt: 223/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-2833		
<b>8</b> Principal occupation / Job title (See Instructions) planning facilitator		<b>9</b> Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703-2833		
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703-2833		
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703-2833		
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703-2833		
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 220/258 Rpt: 224/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharpe, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-2833	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) planning facilitator		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Brigid <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2328	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Brigid <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2328	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheff, Linda <hr/> Contributor address; City; State; Zip Code  Allen, TX 75013-4756	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheff, Linda <hr/> Contributor address; City; State; Zip Code  Allen, TX 75013-4756	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 221/258 Rpt: 225/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76248-5223		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 01/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Keller, TX 76248-5223		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Keller, TX 76248-5223		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Keller, TX 76248-5223		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Keller, TX 76248-5223		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 222/258 Rpt: 226/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> <b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 223/258 Rpt: 227/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> <b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248-5223	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherwood, Katherine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1532	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Energy Business Director		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shihadeh, Juanita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77041-6219	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sien, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6738	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 224/258 Rpt: 228/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simonet, Vernon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dingmans Ferry, PA 18328-3123	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4271	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 225/258 Rpt: 229/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-4271		
<b>8</b> Principal occupation / Job title (See Instructions) Civil Engineer		<b>9</b> Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skidmore, Danielle	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smart, Pat	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Abilene, TX 79605-4916		
Principal occupation / Job title (See Instructions) PETS Specialist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 226/258 Rpt: 230/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Jeremy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78723-2916	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Tech		<b>9</b> Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 227/258 Rpt: 231/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Lawson, Bridgette <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469-6355	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southern, Luanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78745	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 05/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spence, Katie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stahl, Lynn <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-1822	Amount of Contribution (\$)  \$54.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 228/258 Rpt: 232/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Starks, Carol	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77494-6749		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stilley, Jane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Meadows Place, TX 77477-1737		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bern	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bern	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bernardine	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 229/258 Rpt: 233/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bernardine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bernardine <hr/> Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Bernardine <hr/> Contributor address; City; State; Zip Code  Forest Hill, TX 76140-1906	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sund, Lana <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-3709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-3314	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 230/258 Rpt: 234/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-3314	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L ..... Contributor address; City; State; Zip Code  Austin, TX 78703-3314	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L ..... Contributor address; City; State; Zip Code  Austin, TX 78703-3314	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L ..... Contributor address; City; State; Zip Code  Austin, TX 78703-3314	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tabor, Catherine L ..... Contributor address; City; State; Zip Code  Austin, TX 78703-3314	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 231/258 Rpt: 235/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tatroe, Sheryl	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77346-0001		
<b>8</b> Principal occupation / Job title (See Instructions) Baker/Clerk		<b>9</b> Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tcheung, Lueng	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Austin, TX 78745		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tchou, Philip	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  San Antonio, TX 78251-4968		
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 232/258 Rpt: 236/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen <hr/> Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen <hr/> Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Temple, Ellen <hr/> Contributor address; City; State; Zip Code  Lufkin, TX 75901-7346	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terkel, Tom <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-2230	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 233/258 Rpt: 237/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thibodeaux, Joyce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houma, LA 70360-5932	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thistlethwaite, Randall <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1714	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Kathy <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79102-1513	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired social worker		Employer (See Instructions)
Date 02/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Kathy <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79102-1513	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired social worker		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Kathy <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79102-1513	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired social worker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 234/258 Rpt: 238/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Kathy	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Amarillo, TX 79102-1513		
<b>8</b> Principal occupation / Job title (See Instructions) Retired social worker		<b>9</b> Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Cheryl	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code  Orlando, FL 32825-6837		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Cheryl	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Orlando, FL 32825-6837		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78731-2012		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan A.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75225-4035		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 235/258 Rpt: 239/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tomlinson, Sandi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-4619	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-6204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-6204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-6204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-6204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 236/258 Rpt: 240/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027-6204		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77027-6204		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 237/258 Rpt: 241/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006-5443		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Travis, Christopher	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Pine, CO 80470		
Principal occupation / Job title (See Instructions) Designer/Builder		Employer (See Instructions)
Date 01/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 238/258 Rpt: 242/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions)
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Jennifer	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114-1786		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 239/258 Rpt: 243/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vallet, Rita C.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007-7145	
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vallet, Rita C.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Houston, TX 77007-7145	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Maanen, Cynthia	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78704-5478	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Ort, Molly	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75209-5016	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Winkle, Kim	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78704-1645	
Principal occupation / Job title (See Instructions) Executive Editor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 240/258 Rpt: 244/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vaszauskas, Vicki <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lamesa, TX 79331-2607	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) CFO		<b>9</b> Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vaszauskas, Vicki <hr/> Contributor address; City; State; Zip Code  Lamesa, TX 79331-2607	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veliz, MaryEllen <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7316	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 04/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veliz, MaryEllen <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7316	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veliz, MaryEllen <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7316	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 241/258 Rpt: 245/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veliz, MaryEllen <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7316	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vilas, Faith <hr/> Contributor address; City; State; Zip Code  Seabrook, TX 77586-2572	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Astronomer		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villarreal, Pedro <hr/> Contributor address; City; State; Zip Code  Ingram, TX 78025	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villarreal, Pedro <hr/> Contributor address; City; State; Zip Code  Ingram, TX 78025	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villegas, Velma <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-1581	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 242/258 Rpt: 246/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vos, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Old Greenwich, CT 06870-2307	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wagner, Jessica <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-5010	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Public health		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wagner, Jessica <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-5010	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Public health		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wallis, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-6093	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions)
Date 01/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76015-2812	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 243/258 Rpt: 247/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76015-2812		
<b>8</b> Principal occupation / Job title (See Instructions) SW Engineer		<b>9</b> Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Arlington, TX 76015-2812		
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Arlington, TX 76015-2812		
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Arlington, TX 76015-2812		
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warner, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Arlington, TX 76015-2812		
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 244/258 Rpt: 248/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		<b>9</b> Employer (See Instructions)
Date 02/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)
Date 03/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 245/258 Rpt: 249/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Doris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		<b>9</b> Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, David <hr/> Contributor address; City; State; Zip Code  Santa Monica, CA 90403-4668	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 246/258 Rpt: 250/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, Hilary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weir, Greg <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035-3714	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Welch, Ron <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37211-6699	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weldon, Jess <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78681-1030	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Training Director		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Welland, Isabel <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-2316	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 247/258 Rpt: 251/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wenier, Glinda <hr/> <b>6</b> Contributor address; City; State; Zip Code  De Leon, TX 76444-6368	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Marsha <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76108-9727	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Marsha <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76108-9727	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitten, Lynn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3101	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitten, Lynn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3101	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 248/258 Rpt: 252/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Widoff, Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-7106	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilkison, Birk <hr/> Contributor address; City; State; Zip Code  Austin, TX 78717-4215	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Executive Director - Interim		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code  Valdez, AK 99686-1503	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code  Valdez, AK 99686-1503	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code  Valdez, AK 99686-1503	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 249/258 Rpt: 253/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Valdez, AK 99686-1503		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 05/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Valdez, AK 99686-1503		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Elizabeth	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Valdez, AK 99686-1503		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 03/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingate, Steven	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Lewisville, TX 75067-4243		
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winter, H. Leabah	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Alameda, CA 94501-1682		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 250/258 Rpt: 254/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) editor		<b>9</b> Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions)
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 251/258 Rpt: 255/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Cornelia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1952	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) editor		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolff, Win <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 252/258 Rpt: 256/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2635	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren <hr/> Contributor address; City; State; Zip Code  Austin, TX 78728-1416	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 253/258 Rpt: 257/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78728-1416		
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78728-1416		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78728-1416		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78728-1416		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrather, Lauren	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78728-1416		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 254/258 Rpt: 258/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 255/258 Rpt: 259/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Carlecia D.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wyatt, Paul	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75208-3753	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wydick, Judith	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Davis, CA 95616-6693	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yancy, Mary Garwood	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3609	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ybanez, Jesse	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Houston, TX 77095-4687	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 256/258 Rpt: 260/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yeager, Bob <hr/> <b>6</b> Contributor address; City; State; Zip Code  The Woodlands, TX 77380-3344	<b>7</b> Amount of Contribution (\$)  \$26.01
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) York, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78733-1503	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) York, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78733-1503	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) York, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78733-1503	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Sharon K <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-5860	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 257/258 Rpt: 261/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 258/258 Rpt: 262/331
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zainie, Carla <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78215-1016	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/03/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) de la Riva, Isabel <hr/> <b>Contributor address; City; State; Zip Code</b>  San Antonio, TX 78259-2217	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b>
<b>Date</b> 05/03/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) vanVoorhis, Jill <hr/> <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78746-1082	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> corporate strategist		<b>Employer (See Instructions)</b>

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/01/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2023	Payee name ActBlue	
Amount (\$) \$11.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2023	Payee name ActBlue	
Amount (\$) \$26.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/22/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$44.18  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2023	Payee name ActBlue	
Amount (\$) \$23.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2023	Payee name ActBlue	
Amount (\$) \$16.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 02/12/2023	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$9.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/19/2023	Payee name ActBlue
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Amount (\$) \$48.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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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 online contribution processing fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/26/2023	Payee name ActBlue
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Amount (\$) \$30.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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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 online contribution processing fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/05/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$187.34  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/12/2023	Payee name ActBlue	
Amount (\$) \$39.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/19/2023	Payee name ActBlue	
Amount (\$) \$75.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/26/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$29.77  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2023	Payee name ActBlue	
Amount (\$) \$30.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2023	Payee name ActBlue	
Amount (\$) \$2.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/09/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$34.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2023	Payee name ActBlue	
Amount (\$) \$29.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2023	Payee name ActBlue	
Amount (\$) \$30.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 04/30/2023	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$75.28  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/07/2023	Payee name ActBlue
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Amount (\$) \$16.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/14/2023	Payee name ActBlue
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Amount (\$) \$345.13  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/21/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$80.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2023	Payee name ActBlue	
Amount (\$) \$55.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2023	Payee name ActBlue	
Amount (\$) \$22.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 06/11/2023	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$42.44	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/18/2023	Payee name ActBlue
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Amount (\$) \$50.46	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/25/2023	Payee name ActBlue
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Amount (\$) \$45.92	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031
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Expenditure from corporate funds

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

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$59.15  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/14/2023	Payee name ActBlue	
Amount (\$) \$15.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2023	Payee name Alejandro Barragan	
Amount (\$) \$3,200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Address  Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event planning
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.

<b>1</b> Total pages Schedule F1: Sch: 11/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 05/26/2023	<b>5</b> Payee name Annie's List Training and Engagement Fund
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<b>6</b> Amount (\$) \$30,706.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 699  Austin, TX 78767-0699
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shared resource agreement
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/26/2023	Payee name Annie's List Training and Engagement Fund
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Amount (\$) \$6,250.01  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 699  Austin, TX 78767-0699
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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 Shared resource agreement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2023	Payee name BGM Consulting
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Amount (\$) \$1,575.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2447 Cliff Teen Ct  Dallas, TX 75233-1511
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting
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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.

<b>1</b> Total pages Schedule F1: Sch: 12/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 01/17/2023	<b>5</b> Payee name Blue Scout Digital	
<b>6</b> Amount (\$) \$2,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2023	Payee name Blue Scout Digital	
Amount (\$) \$2,400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Digital consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/14/2023	Payee name Blue Scout Digital	
Amount (\$) \$2,200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Digital consulting
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.

<b>1</b> Total pages Schedule F1: Sch: 13/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/10/2023	<b>5</b> Payee name Blue Scout Digital	
<b>6</b> Amount (\$) \$2,400.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Blue Scout Digital	
Amount (\$) \$2,400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Digital consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2023	Payee name Blue Scout Digital	
Amount (\$) \$2,400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Digital consulting
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.

<b>1</b> Total pages Schedule F1: Sch: 14/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/02/2023	<b>5</b> Payee name CCR Studios	
<b>6</b> Amount (\$) \$649.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 9501 Argyle Dr  Austin, TX 78749-5210	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name CCR Studios	
Amount (\$) \$269.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9501 Argyle Dr  Austin, TX 78749-5210	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name Courtyard by Marriot	
Amount (\$) \$610.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 300 E 4th St  Austin, TX 78701-3612	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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.

<b>1</b> Total pages Schedule F1: Sch: 15/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/10/2023	<b>5</b> Payee name Fabre, Rob	
<b>6</b> Amount (\$) \$2,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2506 Manor Cir Apt B26 Austin, TX 78723-5355	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense musician for event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/25/2023	Payee name Facility Concession Services	
Amount (\$) \$6,189.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 W. Riverside Dr.  Austin, TX 78704	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event food and beverage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2023	Payee name Figueroa, Iliana	
Amount (\$) \$1,819.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277  Austin, TX 78703-0055	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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.

<b>1</b> Total pages Schedule F1: Sch: 16/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/10/2023	<b>5</b> Payee name InFocus Campaigns	
<b>6</b> Amount (\$) \$1,369.36  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 10726  Fort Worth, TX 76114-0726	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 calls for Melissa Cabello Havrda Campaign
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2023	Payee name Intuit	
Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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 02/21/2023	Payee name Intuit	
Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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.

<b>1</b> Total pages Schedule F1: Sch: 17/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 03/21/2023	<b>5</b> Payee name Intuit	
<b>6</b> Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name Intuit	
Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2023	Payee name Intuit	
Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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.

<b>1</b> Total pages Schedule F1: Sch: 18/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 06/21/2023	<b>5</b> Payee name Intuit
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<b>6</b> Amount (\$) \$90.61  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/03/2023	Payee name Janetta McCoy Campaign
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Amount (\$) \$2,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1273  Taylor, TX 76574-6273
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/13/2023	Payee name Kalbfleisch, Jacob S
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Amount (\$) \$2,227.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277  Austin, TX 78703-0055
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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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.

<b>1</b> Total pages Schedule F1: Sch: 19/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 01/03/2023	<b>5</b> Payee name NGP Van Inc.
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<b>6</b> Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/06/2023	Payee name NGP Van Inc.
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Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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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 Database software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/03/2023	Payee name NGP Van Inc.
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Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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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 Database software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/03/2023	<b>5</b> Payee name NGP Van Inc.	
<b>6</b> Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2023	Payee name NGP Van Inc.	
Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Database software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2023	Payee name NGP Van Inc.	
Amount (\$) \$1,983.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Database 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.

<b>1</b> Total pages Schedule F1: Sch: 21/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/02/2023	<b>5</b> Payee name Padilla, Graciela	
<b>6</b> Amount (\$) \$297.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 303277  Austin, TX 78703-0055	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/24/2023	Candidate/Officeholder name Padilla, Graciela	
Amount (\$) \$633.49  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 303277  Austin, TX 78703-0055	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Office held		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/13/2023	Candidate/Officeholder name Padilla, Graciela	
Amount (\$) \$2,334.95  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 303277  Austin, TX 78703-0055	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Office held		
<b>9</b> 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.

<b>1</b> Total pages Schedule F1: Sch: 22/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 01/03/2023	<b>5</b> Payee name Paragon
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<b>6</b> Amount (\$) \$163.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/02/2023	Payee name Paragon
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Amount (\$) \$166.91  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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 Online contribution processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/02/2023	Payee name Paragon
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Amount (\$) \$158.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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 Online contribution processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 04/03/2023	<b>5</b> Payee name Paragon
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<b>6</b> Amount (\$) \$346.16  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2023	Payee name Paragon
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Amount (\$) \$861.02  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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 Online contribution processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/02/2023	Payee name Paragon
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Amount (\$) \$1,138.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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 Online contribution processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 01/24/2023	<b>5</b> Payee name Prosperity Bank
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<b>6</b> Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/08/2023	Payee name Prosperity Bank
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Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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 03/07/2023	Payee name Prosperity Bank
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Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 25/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/18/2023	<b>5</b> Payee name Prosperity Bank	
<b>6</b> Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name Prosperity Bank	
Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2023	Payee name Prosperity Bank	
Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 26/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/25/2023	<b>5</b> Payee name Prosperity Bank	
<b>6</b> Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2023	Payee name Prosperity Bank	
Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2023	Payee name Prosperity Bank	
Amount (\$) \$1,728.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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.

<b>1</b> Total pages Schedule F1: Sch: 27/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 02/06/2023	<b>5</b> Payee name Prosperity Bank	
<b>6</b> Amount (\$) \$1,764.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name Prosperity Bank	
Amount (\$) \$3,516.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2023	Payee name Prosperity Bank	
Amount (\$) \$9,754.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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.

<b>1</b> Total pages Schedule F1: Sch: 28/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 06/27/2023	<b>5</b> Payee name Prosperity Bank
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<b>6</b> Amount (\$) \$1,312.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name Prosperity Bank
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Amount (\$) \$36,605.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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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 03/25/2023	Payee name Prosperity Bank
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Amount (\$) \$3,867.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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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.

<b>1</b> Total pages Schedule F1: Sch: 29/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 01/13/2023	<b>5</b> Payee name Ramon, Ana
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<b>6</b> Amount (\$) \$3,688.61  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 303277  Austin, TX 78703-0055
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/28/2023	Payee name Susan Harry Consulting
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Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/28/2023	Payee name Susan Harry Consulting
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Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
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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.

<b>1</b> Total pages Schedule F1: Sch: 30/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 04/28/2023	<b>5</b> Payee name Susan Harry Consulting	
<b>6</b> Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/07/2023	Payee name Susan Harry Consulting	
Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/22/2023	Payee name Susan Harry Consulting	
Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/31 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> Date 06/26/2023	<b>5</b> Payee name Texas Gulf Coast AFL-CIO
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<b>6</b> Amount (\$) \$1,250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2506 Sutherland St  Houston, TX 77023
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/24/2023	Payee name The DoSeum Children's Museum
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Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 Broadway  San Antonio, TX 78209-7034
--	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facility rental for event
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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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# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(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
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/1 Rpt: 294/331	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 05/10/2023	<b>6</b> Payee name Human Age Digital LLC
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<b>7</b> Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 2700 Post Oak Blvd. 21st Floor Houston, TX 77056
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising for Kimberlee Walter
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/01/2023	<b>6</b> Payee name Adobe Systems Inc.
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<b>7</b> Amount (\$) \$59.53	<b>8</b> Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name Adobe Systems Inc.
--------------------	----------------------------------

Amount (\$) \$59.53	Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
--	--------------------

<b>5</b> Date 04/01/2023	<b>6</b> Payee name Adobe Systems Inc.
-----------------------------	---

<b>7</b> Amount (\$) \$59.53 <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704
---	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2023	Payee name Adobe Systems Inc.
--------------------	----------------------------------

Amount (\$) \$59.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704
--	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 3/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 06/01/2023	<b>6</b> Payee name Adobe Systems Inc.
-----------------------------	---

<b>7</b> Amount (\$) \$59.53  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 345 Park Ave  San Jose, CA 95110-2704
---	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
----------------------------------	---	--

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/01/2023	Payee name Adobe Systems Inc.
--------------------	----------------------------------

Amount (\$) \$59.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Ave  San Jose, CA 95110-2704
--	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 4/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/07/2023	<b>6</b> Payee name America Votes
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<b>7</b> Amount (\$) \$400.00  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 1155 Connecticut Ave NW  Washington, DC 20036-4306
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference ticket
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/07/2023	Payee name America Votes
--------------------	-----------------------------

Amount (\$) \$400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1155 Connecticut Ave NW  Washington, DC 20036-4306
--	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference ticket
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 5/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 01/05/2023	<b>6</b> Payee name Boardable
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<b>7</b> Amount (\$) \$9.19  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 6219 Guilford Ave  Indianapolis, IN 46220-3090
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/24/2023	Payee name Boardable
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Amount (\$) \$652.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6219 Guilford Ave  Indianapolis, IN 46220-3090
--	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 6/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/24/2023	<b>6</b> Payee name Boardable
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<b>7</b> Amount (\$) \$149.25  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 6219 Guilford Ave  Indianapolis, IN 46220-3090
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> 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 Boardable
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Amount (\$) \$149.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6219 Guilford Ave  Indianapolis, IN 46220-3090
--	--

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 7/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 04/24/2023	<b>6</b> Payee name Boardable
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<b>7</b> Amount (\$) \$149.25  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 6219 Guilford Ave  Indianapolis, IN 46220-3090
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/02/2023	Payee name Central Market
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Amount (\$) \$368.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4001 N Lamar Blvd  Austin, TX 78756-3733
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/beverages for board meeting
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 8/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/14/2023	<b>6</b> Payee name Courtyard by Marriot
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<b>7</b> Amount (\$) \$28.15  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 300 E 4th St  Austin, TX 78701-3612
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hotel fee
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/24/2023	Payee name CubeSmart
--------------------	-------------------------

Amount (\$) \$515.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 W 5th St  Austin, TX 78703-5103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense storage
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 9/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/20/2023	<b>6</b> Payee name CubeSmart
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<b>7</b> Amount (\$) \$504.90	<b>8</b> Payee address; City; State; Zip Code 1411 W 5th St Austin, TX 78703-5103
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense storage
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/20/2023	Payee name CubeSmart
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Amount (\$) \$504.90	Payee address; City; State; Zip Code 1411 W 5th St Austin, TX 78703-5103
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 10/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/27/2023	<b>6</b> Payee name CubeSmart
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<b>7</b> Amount (\$) \$504.90  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 1411 W 5th St  Austin, TX 78703-5103
---	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense storage
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2023	Payee name CubeSmart
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Amount (\$) \$20.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 W 5th St  Austin, TX 78703-5103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense storage
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 11/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 06/21/2023	<b>6</b> Payee name Delta Airlines
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<b>7</b> Amount (\$) \$387.80	<b>8</b> Payee address; City; State; Zip Code 1030 Delta Blvd  Atlanta, GA 30354-1989
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/07/2023	Payee name DocuSign
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Amount (\$) \$15.99	Payee address; City; State; Zip Code 221 Main St Ste 1000 San Francisco, CA 94105-1925
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 12/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/08/2023	<b>6</b> Payee name DocuSign
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<b>7</b> Amount (\$) \$53.30 <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 221 Main St Ste 1000 San Francisco, CA 94105-1925
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/08/2023	Payee name DocuSign
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Amount (\$) \$69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 221 Main St Ste 1000 San Francisco, CA 94105-1925
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 13/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
--	--------------------

<b>5</b> Date 05/08/2023	<b>6</b> Payee name DocuSign
-----------------------------	---------------------------------

<b>7</b> Amount (\$) \$69.29 <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 221 Main St Ste 1000 San Francisco, CA 94105-1925
--	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/08/2023	Payee name DocuSign
--------------------	------------------------

Amount (\$) \$69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 221 Main St Ste 1000 San Francisco, CA 94105-1925
---	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

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

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 14/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
--	--------------------

<b>5</b> Date 05/19/2023	<b>6</b> Payee name From You Flowers
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<b>7</b> Amount (\$) \$62.75	<b>8</b> Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
---------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers
----------------------------------	--	---

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2023	Payee name From You Flowers
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Amount (\$) \$58.42	Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 15/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 05/19/2023	<b>6</b> Payee name From You Flowers
-----------------------------	---

<b>7</b> Amount (\$) \$58.42	<b>8</b> Payee address; City; State; Zip Code 143 Mill Rock Rd E  Old Saybrook, CT 06475-4217
---------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2023	Payee name From You Flowers
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Amount (\$) \$58.42	Payee address; City; State; Zip Code 143 Mill Rock Rd E  Old Saybrook, CT 06475-4217
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 16/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 05/19/2023	<b>6</b> Payee name From You Flowers
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<b>7</b> Amount (\$) \$67.08  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 143 Mill Rock Rd E  Old Saybrook, CT 06475-4217
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/01/2023	Payee name Google
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Amount (\$) \$179.09  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 17/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/01/2023	<b>6</b> Payee name Google
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<b>7</b> Amount (\$) \$179.09	<b>8</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 service
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/01/2023	Payee name Google
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Amount (\$) \$74.97	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 18/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/01/2023	<b>6</b> Payee name Google
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<b>7</b> Amount (\$) \$179.09	<b>8</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 service
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name Google
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Amount (\$) \$76.15	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 19/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 04/01/2023	<b>6</b> Payee name Google
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<b>7</b> Amount (\$) \$179.09  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 service
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/01/2023	Payee name Google
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Amount (\$) \$76.15  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 20/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 05/01/2023	<b>6</b> Payee name Google
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<b>7</b> Amount (\$) \$179.09	<b>8</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 service
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/08/2023	Payee name Google
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Amount (\$) \$202.18	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 21/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 01/01/2023	<b>6</b> Payee name Google
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<b>7</b> Amount (\$) \$74.24	<b>8</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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<input type="checkbox"/> Expenditure from corporate funds	<b>9</b> TYPE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 service
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/16/2023	Payee name HEB
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Amount (\$) \$13.92	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751-4810
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<input type="checkbox"/> Expenditure from corporate funds	<b>9</b> TYPE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 22/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/21/2023	<b>6</b> Payee name HEB
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<b>7</b> Amount (\$) \$213.30  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 1000 E 41st St  Austin, TX 78751-4810
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food & beverages for office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/05/2023	Payee name Henley Park Hotel
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Amount (\$) \$603.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 926 Massachusetts Ave NW  Washington, DC 20001-4308
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 23/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 01/06/2023	<b>6</b> Payee name Intuit
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<b>7</b> Amount (\$) \$191.88	<b>8</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/06/2023	Payee name Intuit
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Amount (\$) \$213.20	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 24/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/06/2023	<b>6</b> Payee name Intuit
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<b>7</b> Amount (\$) \$213.20  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/06/2023	Payee name Intuit
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Amount (\$) \$213.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 25/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 05/06/2023	<b>6</b> Payee name Intuit
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<b>7</b> Amount (\$) \$213.20  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
---	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2023	Payee name Intuit
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Amount (\$) \$213.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126
--	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 26/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 04/04/2023	<b>6</b> Payee name Priceline.com
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<b>7</b> Amount (\$) \$131.97	<b>8</b> Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854-1631
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/14/2023	Payee name Priceline.com
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Amount (\$) \$123.33	Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854-1631
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 27/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 01/31/2023	<b>6</b> Payee name Prosperity Bank
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<b>7</b> Amount (\$) \$286.23  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
---	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense interest
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/28/2023	Payee name Prosperity Bank
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Amount (\$) \$265.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense interest
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 28/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 05/31/2023	<b>6</b> Payee name Prosperity Bank
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<b>7</b> Amount (\$) \$65.07	<b>8</b> Payee address; City; State; Zip Code PO Box 660525  Dallas, TX 75266-0525
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense interest
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/04/2023	Payee name Royal Fig Catering
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Amount (\$) \$3,526.79	Payee address; City; State; Zip Code 2100 W William Cannon Dr Ste H Austin, TX 78745-4869
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense catering for event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 29/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 05/10/2023	<b>6</b> Payee name Royal Fig Catering
-----------------------------	---

<b>7</b> Amount (\$) \$3,526.78 <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 2100 W William Cannon Dr Ste H Austin, TX 78745-4869
---	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense catering for event
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/16/2023	Payee name Southwest Airlines
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Amount (\$) \$913.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 36647 Dallas, TX 75235-1647
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 30/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 04/11/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$14.00  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code PO Box 36647  Dallas, TX 75235-1647
--	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/14/2023	Payee name Vonlane
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Amount (\$) \$129.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6310 Lemmon Ave Ste 125 Dallas, TX 75209-5812
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bus fare
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 31/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
--	--------------------

<b>5</b> Date 06/14/2023	<b>6</b> Payee name Vonlane
-----------------------------	--------------------------------

<b>7</b> Amount (\$) \$129.00  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 6310 Lemmon Ave Ste 125 Dallas, TX 75209-5812
---	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bus fare
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/21/2023	Payee name Vonlane
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Amount (\$) \$129.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6310 Lemmon Ave Ste 125 Dallas, TX 75209-5812
--	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bus fare
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 32/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 06/22/2023	<b>6</b> Payee name Vonlane
-----------------------------	--------------------------------

<b>7</b> Amount (\$) \$129.00  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 6310 Lemmon Ave Ste 125 Dallas, TX 75209-5812
---	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bus fare
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/14/2023	Payee name Zoom Video Communications
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Amount (\$) \$195.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 33/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,975.12
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<b>5</b> Date 02/13/2023	<b>6</b> Payee name Zoom Video Communications
-----------------------------	--

<b>7</b> Amount (\$) \$195.30	<b>8</b> Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
----------------------------------	---	--

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/13/2023	Payee name Zoom Video Communications
--------------------	---

Amount (\$) \$365.30	Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 34/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 04/13/2023	<b>6</b> Payee name Zoom Video Communications
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<b>7</b> Amount (\$) \$207.90	<b>8</b> Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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<input type="checkbox"/> Expenditure from corporate funds	<b>9</b> TYPE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/13/2023	Payee name Zoom Video Communications
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Amount (\$) \$215.78	Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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<input type="checkbox"/> Expenditure from corporate funds	<b>TYPE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 35/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 06/13/2023	<b>6</b> Payee name Zoom Video Communications
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<b>7</b> Amount (\$) \$218.93	<b>8</b> Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/26/2023	Payee name Zoom Video Communications
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Amount (\$) \$68.61	Payee address; City; State; Zip Code 2400 Allen St  Dallas, TX 75204-2502
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
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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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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 36/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 02/14/2023	<b>6</b> Payee name airbnb.com
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<b>7</b> Amount (\$) \$291.89	<b>8</b> Payee address; City; State; Zip Code 888 Brannan St  San Francisco, CA 94103-4928
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/18/2023	Payee name airbnb.com
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Amount (\$) \$536.68	Payee address; City; State; Zip Code 888 Brannan St  San Francisco, CA 94103-4928
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 37/37 Rpt:	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 1,975.12
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<b>5</b> Date 03/29/2023	<b>6</b> Payee name airbnb.com
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<b>7</b> Amount (\$) \$1,854.86	<b>8</b> Payee address; City; State; Zip Code 888 Brannan St  San Francisco, CA 94103-4928
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Expenditure from corporate funds

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2023	Payee name airbnb.com
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Amount (\$) \$1,553.12	Payee address; City; State; Zip Code 888 Brannan St  San Francisco, CA 94103-4928
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Expenditure from corporate funds

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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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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