

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085309	2 Total pages filed: 65
3 COMMITTEE NAME The 134 Political Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/16/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 357 Mineral Wells, TX 76068	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mrs. Carla S.	
		NICKNAME LAST SUFFIX Porter	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 293 Palo Pinto, TX 76484	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 293 Palo Pinto, TX 76484	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (940) 329-0514	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 07/01/2023 THROUGH 12/31/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 03/05/2024 <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME The 134 Political Action Committee	13 Filer ID (Ethics Commission Filers) 00085309
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,266.67
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,055.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,884.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mrs. Carla S. Porter

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 65

17 COMMITTEE NAME The 134 Political Action Committee		18 Filer ID 00085309	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	7,266.67
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	\$	15,055.02
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/43 Rpt: 4/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Robin <hr/> 6 Contributor address; City; State; Zip Code Brownwood, TX 76801	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Hendrick Brownwood
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code Marfa, TX 79843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code Marfa, TX 79843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code Marfa, TX 79843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code Marfa, TX 79843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/43 Rpt: 5/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, David	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dublin, TX 76446		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dublin, TX 76446		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Gloria	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Blanco, TX 78606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Donna	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77084-2130		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caraway, Bea	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78212		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/43 Rpt: 6/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caraway, Bea <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Trinity University
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caraway, Bea <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caraway, Bea <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargas, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Cathy <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/43 Rpt: 7/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzson, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzson, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzson, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie <hr/> Contributor address; City; State; Zip Code Mertzson, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/43 Rpt: 8/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Mertzon, TX 76941		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mertzon, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/43 Rpt: 9/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronshey, Richard <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/43 Rpt: 10/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Sr. Copywriter		9 Employer (See Instructions) TMP
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) TMP
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Douglas Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) Radancy
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Kathryn Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Shell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/43 Rpt: 11/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Irasema <hr/> 6 Contributor address; City; State; Zip Code Edinburg, TX 78541	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78541	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78541	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geeslin, Jill <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/43 Rpt: 12/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) GibsonFirm
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/43 Rpt: 13/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79407		
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) GibsonFirm
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79407		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/43 Rpt: 14/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) GibsonFirm
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/43 Rpt: 15/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067		
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Self Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Mineral Wells, TX 76067		
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Washington, TX 20009		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Washington, TX 20009		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Washington, TX 20009		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/43 Rpt: 16/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel <hr/> 6 Contributor address; City; State; Zip Code Washington, TX 20009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code Washington, TX 20009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code Washington, TX 20009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe <hr/> Contributor address; City; State; Zip Code Boyd, TX 76023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/43 Rpt: 17/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77252	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) assistant director		9 Employer (See Instructions) University of Texas Houston
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/43 Rpt: 18/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Bobby Jo "BJ" <hr/> 6 Contributor address; City; State; Zip Code Burnet, TX 79611	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/43 Rpt: 19/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76085	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) writer/designer		9 Employer (See Instructions) self
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/43 Rpt: 20/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Jackson Walker LLP
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/43 Rpt: 21/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76904	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, David <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/43 Rpt: 22/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75203		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/43 Rpt: 23/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75203	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/43 Rpt: 24/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) San Angelo Early Childhood Center
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lasswell, Stella <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) NONE
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/43 Rpt: 25/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob 6 Contributor address; City; State; Zip Code Hereford, TX 79045	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) Laurel Strategies
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob Contributor address; City; State; Zip Code Hereford, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/43 Rpt: 26/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Langley & Banack Inc
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Heriberto	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/43 Rpt: 27/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Coordinated Campaign Director		9 Employer (See Instructions) Texas Democratic Party
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/43 Rpt: 28/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Brooklynne	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78703		
8 Principal occupation / Job title (See Instructions) Coordinated Campaign Director		9 Employer (See Instructions) Texas Democratic Party
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/43 Rpt: 29/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho <hr/> 6 Contributor address; City; State; Zip Code Eagle Pass, TX 78852	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Nevarez Law Group PC
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevarez, Poncho <hr/> Contributor address; City; State; Zip Code Eagle Pass, TX 78852	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Brandy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LMS Specialist		Employer (See Instructions) Tyler Technologies
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/43 Rpt: 30/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> 6 Contributor address; City; State; Zip Code New Waverly, TX 77358	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Faa		9 Employer (See Instructions) Atcs
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/43 Rpt: 31/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/43 Rpt: 32/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> 6 Contributor address; City; State; Zip Code Lamesa, TX 79331	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> Contributor address; City; State; Zip Code Lamesa, TX 79331	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SUSAN <hr/> Contributor address; City; State; Zip Code Lamesa, TX 79331	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonmaker, Jayne <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Stephens Memorial Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/43 Rpt: 33/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> 6 Contributor address; City; State; Zip Code Palo Pinto, TX 76484	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions) Stephens Memorial Hospital
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/43 Rpt: 34/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pediatrician		9 Employer (See Instructions) Shannon Clinic
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shilkun, Kenneth <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/43 Rpt: 35/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
8 Principal occupation / Job title (See Instructions) Social Service		9 Employer (See Instructions) Bluebonnet Homes
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slone, Jeri	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/43 Rpt: 36/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sylvia Dickey <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code San angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code San angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code San angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/43 Rpt: 37/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stribling, Shelly <hr/> 6 Contributor address; City; State; Zip Code San angelo, TX 76904	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code San angelo, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/43 Rpt: 38/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> 6 Contributor address; City; State; Zip Code Burnet, TX 78611	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/43 Rpt: 39/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi <hr/> 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) R.N. And Professor		9 Employer (See Instructions) Texas Wesleyan u.
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 07/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/43 Rpt: 40/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 08/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> 6 Contributor address; City; State; Zip Code Dubin, TX 76446	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) artist and writer		9 Employer (See Instructions) self
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann <hr/> Contributor address; City; State; Zip Code Dubin, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/43 Rpt: 41/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Roseann <hr/> 6 Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/43 Rpt: 42/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Austin, TX 78723	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Microsoft
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78723	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Becky	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Cedar park, TX 78613	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Becky	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) adjunct professor		Employer (See Instructions) Austin Community College
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walch, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Stonewall, TX 78671	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ave Maria Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/43 Rpt: 43/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wedig, Lynette	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Kerrville, TX 78028		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Alamogordo, TX 88310		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Phillip	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Phillip	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Phillip	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/43 Rpt: 44/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Phillip	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zephier, Darin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Angelo, TX 76904		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) HEG
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zephier, Darin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Angelo, TX 76904		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) HEG
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/43 Rpt: 45/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) pharmacist		9 Employer (See Instructions) walmart
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) conley, judith <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/43 Rpt: 46/65
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) pate, sylvia 6 Contributor address; City; State; Zip Code Christoval, TX 76935	7 Amount of Contribution (\$) \$16.67
8 Principal occupation / Job title (See Instructions) Bed and breakfast		9 Employer (See Instructions) Self

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/19 Rpt: 47/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/14/2023	5 Payee name Baird, Stephanie	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 49 Garden Grove Drive Manuel, TX 77578	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant Justice of the Peace Prec 4 Place 1
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Best Western	
Amount (\$) \$276.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 908 Buchanan Dr. Burnet , TX 78611	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting room rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2023	Payee name Burge, Taylor	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 406 South Church Street Lockhart , TX 78644	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Commissioner PRCT 1
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/19 Rpt: 48/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/15/2023	5 Payee name Byrd, Brandy	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3800 John Chisolm LP Apt 8 Killeen, TX 76542	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Tax Assessor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name COA Library	
Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 413 SE 4th Street Amarillo , TX 79101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting room rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name Cruz Serrano, Mary	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 258 Morgan Mill, TX 76465	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant Tax Assessor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/19 Rpt: 49/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/15/2023	5 Payee name Cummings , Michele	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 212 Belton , TX 76513	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Attorney
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name First Financial Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abliene, TX 79601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2023	Payee name First Financial Bank	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abliene, TX 79601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/19 Rpt: 50/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 08/01/2023	5 Payee name First Financial Bank
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6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee for monthly Statement
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2023	Payee name First Financial Bank
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking monthly fee for account
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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 08/31/2023	Payee name First Financial Bank
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Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bill Pay Monthly Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/19 Rpt: 51/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/01/2023	5 Payee name First Financial Bank	
6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/15/2023	Candidate/Officeholder name First Financial Bank	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 400 Pine Street Abilene, TX 79601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/29/2023	Candidate/Officeholder name First Financial Bank	
Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Office sought 400 Pine Street Abilene, TX 79601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bill Pay Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/19 Rpt: 52/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/16/2023	5 Payee name First Financial Bank	
6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Banking Account Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2023	Payee name First Financial Bank	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601	
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 Bank Statement Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name First Financial Bank	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abilene, TX 79601	
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 Bank Account Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/19 Rpt: 53/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 11/30/2023	5 Payee name First Financial Bank
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6 Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Pine Street Abliene, TX 79601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee Bill Pay
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name First Financial Bank
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abliene, TX 79601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Statement 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 12/29/2023	Payee name First Financial Bank
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Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street Abliene, TX 79601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Bill Pay Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/19 Rpt: 54/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 12/15/2023	5 Payee name Goodwin, Terris
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6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1916 Temple, TX 76503
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Commissioner PRCT 3
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Google
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Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043
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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 Google Drive storage 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 08/01/2023	Payee name Google
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Amount (\$) \$35.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043
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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 Fees for Google Drive/Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/19 Rpt: 55/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/01/2023	5 Payee name Google	
6 Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee for google drive
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2023	Payee name Google	
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly email and google drive fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2023	Payee name Google	
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google drive and email fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/19 Rpt: 56/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/10/2023	5 Payee name HEB	
6 Amount (\$) \$139.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1503 RM 1431 Marble Falls , TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense supplies for meeting in Marble Falls Texas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name Hampton Inn	
Amount (\$) \$284.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 499 Singing Oaks Spring Branch Texas , TX 78070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental of 2 meeting and rooms
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/05/2023	Payee name Hopper	
Amount (\$) \$377.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5795 Avenue de Gaspe Montreal Quebec H2S2X3 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expenses for meeting location and rental of room
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/19 Rpt: 57/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/06/2023	5 Payee name Hopper	
6 Amount (\$) \$155.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5795 Avenue de Gaspe Montreal Quebec H2S2X3 Canada	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental of room for meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/14/2023	Payee name Hopper	
Amount (\$) \$263.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5795 Avenue de Gaspe Montreal Quebec H2S2X3 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental for meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name Hopper	
Amount (\$) \$184.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5795 Avenue de Gaspe Montreal Quebec H2S2X3 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/19 Rpt: 58/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
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4 Date 10/12/2023	5 Payee name Hopper
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6 Amount (\$) \$191.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5795 Avenue de Gaspe Montreal Quebec H2S2X3 Canada
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting room rental
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name Jackson, Idella
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Amount (\$) \$375.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3118 Walnut Street Amarillo, TX 79107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant Constable PRECT 4
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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 12/15/2023	Payee name Johnson, Gregory
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 101 Killeem, TX 76540
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant Justice of the Peace PRECT 4
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/19 Rpt: 59/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 10/16/2023	5 Payee name Later.com	
6 Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 88 E Pender Street Vancouver Canada	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Later.com	
Amount (\$) \$42.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street Vancouver Canada	
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 Social Media Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Later.com	
Amount (\$) \$42.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street Vancouver Canada	
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 Social Media Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/19 Rpt: 60/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/06/2023	5 Payee name Martinez, David	
6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 4133 Amarillo, TX 79116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant for County Commissioner PRECT 1
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/06/2023	Candidate/Officeholder name Miller, Marianne	
Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 202 Wayne Drive Nolanville, TX 76559	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Commissioner PRCT 1
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/07/2023	Candidate/Officeholder name Office Depot	
Amount (\$) \$60.62 <input type="checkbox"/> Expenditure from corporate funds	Office sought 2622 Wolfiin Village Amarillo, TX 79109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print materials for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/19 Rpt: 61/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/31/2023	5 Payee name Office Depot	
6 Amount (\$) \$60.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2622 Wolflin Village Amarillo, TX 79109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print materials for meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2023	Payee name Pardo, Joy	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 Mockingbird Lane Lockhart, TX 78644	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant Paid County Tax Assessor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name RVR TRAIL RENTAL	
Amount (\$) \$140.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1709 W Street Kerrville , TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting rental expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/19 Rpt: 62/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 12/06/2023	5 Payee name Sanders, Julie	
6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1214 Dawnridge Drive Canyon Lake , TX 78133	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Commissioner PRCT 1
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Thibodeau, Pollyanna	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 NE 4TH Street Hubbard, TX 76648	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee Grant County Commissioner PRCT 3
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2023	Payee name USPS	
Amount (\$) \$29.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 N. 5th Street Palo Pinto, TX 76484	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/19 Rpt: 63/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/27/2023	5 Payee name Zoom	
6 Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee for video conf
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name Zoom	
Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly video conference fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2023	Payee name Zoom	
Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly video conf 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/19 Rpt: 64/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 11/27/2023	5 Payee name Zoom	
6 Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conferencing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/27/2023	Payee name Zoom	
Amount (\$) \$17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conf Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name iPay	
Amount (\$) \$4.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Bill Pay Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/19 Rpt: 65/65	2 FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4 Date 09/07/2023	5 Payee name wix.com	
6 Amount (\$) \$345.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Francisco , CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Fee for email and web
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/26/2023	Payee name wix.com	
Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Francisco , CA 94158	
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 Email and web monthly fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2023	Payee name wix.com	
Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Francisco , CA 94158	
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 Email platform fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held