

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00082985	<b>2 Total pages filed:</b> 291
<b>3 COMMITTEE NAME</b> Cambio Texas PAC		<b>OFFICE USE ONLY</b>	
		Date Received <b>ELECTRONICALLY FILED</b> 01/15/2024	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address	<b>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</b> 135 Paseo Del Prado, STE 62  Edinburg, TX 78539		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST Mr.                                      Parthkumar	MI	
	NICKNAME                              LAST                                      SUFFIX Naik		
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(Residence or Business)</small>	<b>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE</b> 135 Paseo Del Prado, STE 62  Edinburg, TX 78539		
	<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address		
		<b>STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</b> 4108 Nightshade Ave.  McAllen, TX 78504	
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE              PHONE NUMBER              EXTENSION (956) 330-7552		
<b>9 REPORT TYPE</b>	<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		
<b>10 PERIOD COVERED</b>	Month      Day      Year                                      Month      Day      Year 07/01/2023                                      THROUGH                                      12/31/2023		
<b>11 ELECTION</b>	ELECTION DATE Month      Day      Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cambio Texas PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00082985
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,683.76
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 12,852.79
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 3,554.76
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

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

Mr. Parthkumar Naik  
\_\_\_\_\_  
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

<b>17 COMMITTEE NAME</b> Cambio Texas PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00082985
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,683.76
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	\$ 12,852.79
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**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/262 Rpt: 4/291
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 07/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph	7 Amount of Contribution (\$) \$2.50
	6 Contributor address; City; State; Zip Code  Miami, FL 33172	
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Canival Cruises
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code  Miami, FL 33172	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Canival Cruises
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code  Miami, FL 33172	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Canival Cruises
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code  Miami, FL 33172	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Canival Cruises
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code  Miami, FL 33172	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Canival Cruises

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/262 Rpt: 5/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A Bernal, Joseph <hr/> <b>6</b> Contributor address; City; State; Zip Code  Miami, FL 33172	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Canival Cruises
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abarca, Onofre Antonio <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94601	Amount of Contribution (\$)  \$5.00
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#: _____ ) Abarca, Onofre Antonio <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94601	Amount of Contribution (\$)  \$5.00
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#: _____ ) Aguilar, Kara <hr/> Contributor address; City; State; Zip Code  Tulsa, OK 74105	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguilar, Kara <hr/> Contributor address; City; State; Zip Code  Tulsa, OK 74105	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/262 Rpt: 6/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguilar, Kara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tulsa, OK 74105	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Analyst		<b>9</b> Employer (See Instructions) Cvent
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguilar, Kara <hr/> Contributor address; City; State; Zip Code  Tulsa, OK 74105	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent
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Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allegoren, David <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/262 Rpt: 7/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allegoren, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Davis, CA 95618	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allegoren, David <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allegoren, David <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Milton, MA 02186	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) professor		<b>9</b> Employer (See Instructions) University of Massachusetts
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Milton, MA 02186	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) professor		<b>9</b> Employer (See Instructions) University of Massachusetts
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Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
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Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/262 Rpt: 10/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Milton, MA 02186	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) professor		<b>9</b> Employer (See Instructions) University of Massachusetts
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code  Milton, MA 02186	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) University of Massachusetts
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/262 Rpt: 11/291
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia	7 Amount of Contribution (\$)  \$1.43
	6 Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	
8 Principal occupation / Job title (See Instructions) Proposal Manager		9 Employer (See Instructions) Cigna
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia	Amount of Contribution (\$)  \$1.43
	Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ananson, Stasia	Amount of Contribution (\$)  \$1.43
	Contributor address; City; State; Zip Code  Bridgewater, NJ 08807	
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Cigna
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric	Amount of Contribution (\$)  \$2.78
	Contributor address; City; State; Zip Code  Seattle, WA 98103	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Seattle, WA 98103	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98103	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/262 Rpt: 13/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98103	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Eric <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/262 Rpt: 14/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andree Wiltens, Matt	<b>7</b> Amount of Contribution (\$) \$3.57
<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90046		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna	Amount of Contribution (\$) \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna	Amount of Contribution (\$) \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna	Amount of Contribution (\$) \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna	Amount of Contribution (\$) \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/262 Rpt: 15/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnzen, Mauna	<b>7</b> Amount of Contribution (\$)  \$3.88
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94104		
<b>8</b> Principal occupation / Job title (See Instructions) accountant		<b>9</b> Employer (See Instructions) Tarlson & Associates
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnzen, Mauna	Amount of Contribution (\$)  \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/262 Rpt: 16/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Spotify
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballantine, Alistair	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Brooklyn, NY 11201		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric	Amount of Contribution (\$)  \$3.75
Contributor address; City; State; Zip Code  livingstgon, NJ 07039		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric	Amount of Contribution (\$)  \$3.75
Contributor address; City; State; Zip Code  livingstgon, NJ 07039		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/262 Rpt: 17/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  livingstgon, NJ 07039	<b>7</b> Amount of Contribution (\$)  \$3.75
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Federal Govt
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric <hr/> Contributor address; City; State; Zip Code  livingstgon, NJ 07039	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric <hr/> Contributor address; City; State; Zip Code  livingstgon, NJ 07039	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltuch, Eric <hr/> Contributor address; City; State; Zip Code  livingstgon, NJ 07039	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Federal Govt
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/262 Rpt: 18/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$5.04
<b>8</b> Principal occupation / Job title (See Instructions) Author		<b>9</b> Employer (See Instructions) Self
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barton, Chris <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$5.04
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/262 Rpt: 19/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Battin, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Olympia, WA 98501	<b>7</b> Amount of Contribution (\$)  \$7.14
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code  Olympia, WA 98501	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code  Olympia, WA 98501	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code  Olympia, WA 98501	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Battin, Marilyn <hr/> Contributor address; City; State; Zip Code  Olympia, WA 98501	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/262 Rpt: 20/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Audio Video Lights Production		<b>9</b> Employer (See Instructions) Christ's Church of the Valley
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/262 Rpt: 21/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baugus, Justin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Phoenix, AZ 85037	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Audio Video Lights Production		<b>9</b> Employer (See Instructions) Christ's Church of the Valley
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code  GREER, SC 29651-9029	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baumstark, Kimberly <hr/> Contributor address; City; State; Zip Code  GREER, SC 29651-9029	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beetem, Doris <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Schlumberger
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> Contributor address; City; State; Zip Code  Portland, OR 97215	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/262 Rpt: 22/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97215	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Providence Health and Services
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> Contributor address; City; State; Zip Code  Portland, OR 97215	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> Contributor address; City; State; Zip Code  Portland, OR 97215	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> Contributor address; City; State; Zip Code  Portland, OR 97215	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Christopher <hr/> Contributor address; City; State; Zip Code  Portland, OR 97215	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Providence Health and Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/262 Rpt: 23/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60610	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Public Health Nutrition		<b>9</b> Employer (See Instructions) Illinois Public Health Institute
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Public Health Nutrition		Employer (See Instructions) Illinois Public Health Institute
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Public Health Nutrition		Employer (See Instructions) Illinois Public Health Institute
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Public Health Nutrition		Employer (See Instructions) Illinois Public Health Institute
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Public Health Nutrition		Employer (See Instructions) Illinois Public Health Institute

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/262 Rpt: 24/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Kathryn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60610	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Public Health Nutrition		<b>9</b> Employer (See Instructions) Illinois Public Health Institute
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code  Abington, MA 02351	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code  Abington, MA 02351	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code  Abington, MA 02351	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code  Abington, MA 02351	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/262 Rpt: 25/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$2.78</span>
<b>6</b> Contributor address; City; State; Zip Code  Abington, MA 02351		
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Your Part-Time Controller
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blanchard, Heather	Amount of Contribution (\$) <span style="float: right;">\$2.78</span>
Contributor address; City; State; Zip Code  Abington, MA 02351		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bloom, Ellen	Amount of Contribution (\$) <span style="float: right;">\$3.13</span>
Contributor address; City; State; Zip Code  Fridley, MN 55432		
Principal occupation / Job title (See Instructions) Study Director		Employer (See Instructions) NAMSA
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bloom, Ellen	Amount of Contribution (\$) <span style="float: right;">\$3.13</span>
Contributor address; City; State; Zip Code  Fridley, MN 55432		
Principal occupation / Job title (See Instructions) Study Director		Employer (See Instructions) NAMSA
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bloom, Ellen	Amount of Contribution (\$) <span style="float: right;">\$3.13</span>
Contributor address; City; State; Zip Code  Fridley, MN 55432		
Principal occupation / Job title (See Instructions) Study Director		Employer (See Instructions) NAMSA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/262 Rpt: 26/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Software developer		<b>9</b> Employer (See Instructions) Farmers Business Network
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/262 Rpt: 27/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breitenbuecher, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Software developer		<b>9</b> Employer (See Instructions) Farmers Business Network
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/262 Rpt: 28/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth	<b>7</b> Amount of Contribution (\$) \$1.00
<b>6</b> Contributor address; City; State; Zip Code  White Settlement, TX 76108		
<b>8</b> Principal occupation / Job title (See Instructions) Material Handler		<b>9</b> Employer (See Instructions) Ryder
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brubaker, Kenneth	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  White Settlement, TX 76108		
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code  Savannah, GA 31411		
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code  Savannah, GA 31411		
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code  Savannah, GA 31411		
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/262 Rpt: 29/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Savannah, GA 31411	<b>7</b> Amount of Contribution (\$)  \$6.25
<b>8</b> Principal occupation / Job title (See Instructions) Principal Software Application Engineer		<b>9</b> Employer (See Instructions) Workday
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William <hr/> Contributor address; City; State; Zip Code  Savannah, GA 31411	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burdick, William <hr/> Contributor address; City; State; Zip Code  Savannah, GA 31411	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Principal Software Application Engineer		Employer (See Instructions) Workday
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Frances <hr/> Contributor address; City; State; Zip Code  berkeley, CA 94707	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Frances <hr/> Contributor address; City; State; Zip Code  berkeley, CA 94707	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/262 Rpt: 30/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Frances <hr/> <b>6</b> Contributor address; City; State; Zip Code  berkeley, CA 94707	<b>7</b> Amount of Contribution (\$)  \$1.88
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Frances <hr/> Contributor address; City; State; Zip Code  berkeley, CA 94707	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Frances <hr/> Contributor address; City; State; Zip Code  berkeley, CA 94707	Amount of Contribution (\$)  \$1.88
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#: _____ ) Burgess, Frances <hr/> Contributor address; City; State; Zip Code  berkeley, CA 94707	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/262 Rpt: 31/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nashville, TN 37206	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Bass Berry & Sims
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, Emily <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/262 Rpt: 32/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98105	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Biz+dev		<b>9</b> Employer (See Instructions) Valve
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/262 Rpt: 33/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butlin, Augusta <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98105	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Biz+dev		<b>9</b> Employer (See Instructions) Valve
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/262 Rpt: 34/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Woodinville, WA 98072	<b>7</b> Amount of Contribution (\$)  \$2.22
<b>8</b> Principal occupation / Job title (See Instructions) AP Clerk		<b>9</b> Employer (See Instructions) Manson Construction Co.
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byers, Connor <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/262 Rpt: 35/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) United Nations
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) C Burns, Delia <hr/> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CULP, MEREDITH <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Keurig Dr Pepper
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CULP, MEREDITH <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Keurig Dr Pepper

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/262 Rpt: 36/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CULP, MEREDITH <hr/> <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) IT Manager		<b>9</b> Employer (See Instructions) Keurig Dr Pepper
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Casarez, Ruth <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/262 Rpt: 37/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Civil servant		<b>9</b> Employer (See Instructions) Franchise Tax Board
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/262 Rpt: 38/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Deerfield, IL 60015	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Non Profit		<b>9</b> Employer (See Instructions) JCFS
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase Jr, Theodore <hr/> Contributor address; City; State; Zip Code  Princeton, NJ 08540	Amount of Contribution (\$)  \$43.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/262 Rpt: 39/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase Jr, Theodore <hr/> <b>6</b> Contributor address; City; State; Zip Code  Princeton, NJ 08540	<b>7</b> Amount of Contribution (\$)  \$42.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code  Holladay, UT 84124	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code  Holladay, UT 84124	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code  Holladay, UT 84124	Amount of Contribution (\$)  \$3.12
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#: _____ ) Christenson, Marissa <hr/> Contributor address; City; State; Zip Code  Holladay, UT 84124	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/262 Rpt: 40/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa	<b>7</b> Amount of Contribution (\$) \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Holladay, UT 84124		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code  Holladay, UT 84124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Seattle, WA 98102-5144		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Seattle, WA 98102-5144		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Seattle, WA 98102-5144		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/262 Rpt: 41/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clarke, Kailin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98102-5144	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Researcher		<b>9</b> Employer (See Instructions) Amazon
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clarke, Kailin <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102-5144	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clarke, Kailin <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102-5144	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Amazon
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/262 Rpt: 42/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Research		<b>9</b> Employer (See Instructions) Department of Veterans Affairs
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clote, Paul <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) McGinnis Lochridge

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/262 Rpt: 43/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Northridge, CA 91343	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) administrative		<b>9</b> Employer (See Instructions) shalom institute
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah <hr/> Contributor address; City; State; Zip Code  Northridge, CA 91343	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah <hr/> Contributor address; City; State; Zip Code  Northridge, CA 91343	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah <hr/> Contributor address; City; State; Zip Code  Northridge, CA 91343	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah <hr/> Contributor address; City; State; Zip Code  Northridge, CA 91343	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) administrative		Employer (See Instructions) shalom institute

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/262 Rpt: 44/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collica, Sarah	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>6</b> Contributor address; City; State; Zip Code  Northridge, CA 91343		
<b>8</b> Principal occupation / Job title (See Instructions) administrative		<b>9</b> Employer (See Instructions) shalom institute
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/262 Rpt: 45/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94618		
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Urban Machine
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compton, Tyler	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conyngham, Karen	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conyngham, Karen	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conyngham, Karen	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/262 Rpt: 46/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) researcher		<b>9</b> Employer (See Instructions) Self
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43215	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43215	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/262 Rpt: 47/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotner, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43215	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineering		<b>9</b> Employer (See Instructions) Fusion Alliance
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotner, Adam <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43215	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotner, Adam <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43215	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotner, Adam <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43215	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Courtney, Carole <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/262 Rpt: 48/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Courtney, Carole <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Marcos, TX 78666	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Courtney, Carole <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$10.00
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#: _____ ) Courtney, Carole <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$10.00
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#: _____ ) Courtney, Carole <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$10.00
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#: _____ ) Courtney, Carole <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/262 Rpt: 49/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Aerospace manager		<b>9</b> Employer (See Instructions) Northrop Grumman
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/262 Rpt: 50/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Aerospace manager		<b>9</b> Employer (See Instructions) Northrop Grumman
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/262 Rpt: 51/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> <b>6</b> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Graduate Student		<b>9</b> Employer (See Instructions) University of Cape Town South Africa
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, losac <hr/> Contributor address; City; State; Zip Code  Woodlawn, TN 37191	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Cape Town South Africa
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline <hr/> Contributor address; City; State; Zip Code  Dayville, CT 06241	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/262 Rpt: 52/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Dayville, CT 06241		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Caroline	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/262 Rpt: 53/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Domingo, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10150	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Domingo, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10150	Amount of Contribution (\$)  \$2.50
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#: _____ ) Domingo, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10150	Amount of Contribution (\$)  \$2.50
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#: _____ ) Domingo, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10150	Amount of Contribution (\$)  \$2.50
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#: _____ ) Domingo, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10150	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/262 Rpt: 54/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Domingo, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10150	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> Contributor address; City; State; Zip Code  Walnut, CA 91789	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> Contributor address; City; State; Zip Code  Walnut, CA 91789	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> Contributor address; City; State; Zip Code  Walnut, CA 91789	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> Contributor address; City; State; Zip Code  Walnut, CA 91789	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/262 Rpt: 55/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> <b>6</b> Contributor address; City; State; Zip Code  Walnut, CA 91789	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) physician		<b>9</b> Employer (See Instructions) SCPMG
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donath, Jeff <hr/> Contributor address; City; State; Zip Code  Walnut, CA 91789	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code  burbank, CA 91505	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/262 Rpt: 56/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95129	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Community Worker		<b>9</b> Employer (See Instructions) Santa Clara County
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code  Billerica, MA 01821	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/262 Rpt: 57/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Billerica, MA 01821	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Programmer		<b>9</b> Employer (See Instructions) Genuine Interactive
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code  Billerica, MA 01821	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code  Billerica, MA 01821	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code  Billerica, MA 01821	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code  Billerica, MA 01821	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/262 Rpt: 58/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78727		
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Tangoe Inc
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tangoe Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/262 Rpt: 59/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunbar, Garyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78727	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Tangoe Inc
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duprey, Tom <hr/> Contributor address; City; State; Zip Code  Hollywood, FL 33019	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duprey, Tom <hr/> Contributor address; City; State; Zip Code  Hollywood, FL 33019	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duprey, Tom <hr/> Contributor address; City; State; Zip Code  Hollywood, FL 33019	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duprey, Tom <hr/> Contributor address; City; State; Zip Code  Hollywood, FL 33019	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/262 Rpt: 60/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom	<b>7</b> Amount of Contribution (\$) \$2.00
<b>6</b> Contributor address; City; State; Zip Code  Hollywood, FL 33019		
<b>8</b> Principal occupation / Job title (See Instructions) Mkt Rep		<b>9</b> Employer (See Instructions) Mercury Ins
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Hollywood, FL 33019		
Principal occupation / Job title (See Instructions) Mkt Rep		Employer (See Instructions) Mercury Ins
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Philadelphia, PA 19146		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Philadelphia, PA 19146		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, John	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Philadelphia, PA 19146		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/262 Rpt: 61/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eaton, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Philadelphia, PA 19146	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) KIPP
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eaton, John <hr/> Contributor address; City; State; Zip Code  Philadelphia, PA 19146	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/262 Rpt: 62/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boise, ID 83702	<b>7</b> Amount of Contribution (\$)  \$2.08
<b>8</b> Principal occupation / Job title (See Instructions) Planner		<b>9</b> Employer (See Instructions) Ada County Highway District
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon <hr/> Contributor address; City; State; Zip Code  South Freeport, ME 04078	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon <hr/> Contributor address; City; State; Zip Code  South Freeport, ME 04078	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/262 Rpt: 63/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  South Freeport, ME 04078		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  South Freeport, ME 04078		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  South Freeport, ME 04078		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Jon	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  South Freeport, ME 04078		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eiger, Diane	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Los Altos, CA 94024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/262 Rpt: 64/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eiger, Diane	<b>7</b> Amount of Contribution (\$)  \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Los Altos, CA 94024	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eiger, Diane	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Los Altos, CA 94024	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eiger, Diane	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Los Altos, CA 94024	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endo, Katy	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Keurig Dr Pepper
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endo, Katy	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Keurig Dr Pepper



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/262 Rpt: 65/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endo, Katy	<b>7</b> Amount of Contribution (\$)  \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Keurig Dr Pepper
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endo, Katy	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Keurig Dr Pepper
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endo, Katy	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Keurig Dr Pepper
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Haines City, FL 33844	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Haines City, FL 33844	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/262 Rpt: 66/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth <hr/> <b>6</b> Contributor address; City; State; Zip Code  Haines City, FL 33844	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) PCSB
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth <hr/> Contributor address; City; State; Zip Code  Haines City, FL 33844	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth <hr/> Contributor address; City; State; Zip Code  Haines City, FL 33844	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, MaryBeth <hr/> Contributor address; City; State; Zip Code  Haines City, FL 33844	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code  Indialantic, FL 32903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/262 Rpt: 67/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Indialantic, FL 32903	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code  Indialantic, FL 32903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code  Indialantic, FL 32903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code  Indialantic, FL 32903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ernest, Rose Marie <hr/> Contributor address; City; State; Zip Code  Indialantic, FL 32903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/262 Rpt: 68/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erskine, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) UCLA
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erskine, Laura <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erskine, Laura <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erskine, Laura <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erskine, Laura <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/262 Rpt: 69/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) UCLA
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Douglas <hr/> Contributor address; City; State; Zip Code  Cary, NC 27518	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lenovo
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/262 Rpt: 70/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faust, Travis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wellesley, MA 02481	<b>7</b> Amount of Contribution (\$)  \$1.88
<b>8</b> Principal occupation / Job title (See Instructions) Scientist		<b>9</b> Employer (See Instructions) UMass Chan Medical School
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faust, Travis <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faust, Travis <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Filipowski, Victoria <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30313	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Change Management		Employer (See Instructions) Accenture
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Filipowski, Victoria <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30313	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Change Management		Employer (See Instructions) Accenture

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/262 Rpt: 71/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Neal <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Lead Scientist		<b>9</b> Employer (See Instructions) Navatek Ltd
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Neal <hr/> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Neal <hr/> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Neal <hr/> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Neal <hr/> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/262 Rpt: 72/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Lead Scientist		<b>9</b> Employer (See Instructions) Navatek Ltd
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/262 Rpt: 73/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher, Tracey <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	<b>7</b> Amount of Contribution (\$)  \$3.58
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Varian Medical Systems
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/262 Rpt: 74/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) CSL Behring
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code  Penn Valley, PA 19072	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CSL Behring
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/262 Rpt: 75/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98115	<b>7</b> Amount of Contribution (\$)  \$8.34
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flint, Jim <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
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#: _____ ) Franck, Hugh <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32608	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/262 Rpt: 76/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Franck, Hugh <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gainesville, FL 32608	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Pharmacist		<b>9</b> Employer (See Instructions) Department of Veterans Affairs
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Franck, Hugh <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32608	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Franck, Hugh <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32608	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Franck, Hugh <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32608	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Franck, Hugh <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32608	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/262 Rpt: 77/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Diego, CA 92130	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Attorney/Mediator		<b>9</b> Employer (See Instructions) L/O Robert L. Friedenberg
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenberg
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenberg
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenberg
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Attorney/Mediator		Employer (See Instructions) L/O Robert L. Friedenberg

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/262 Rpt: 78/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friedenberg, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Diego, CA 92130	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Attorney/Mediator		<b>9</b> Employer (See Instructions) L/O Robert L. Friedenberg
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gaeta, Marilyn <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78249	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Rose Marie <hr/> Contributor address; City; State; Zip Code  Victorville, CA 92495	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Administrative Services Manager		Employer (See Instructions) Apple Valley Fire Protection District
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Rose Marie <hr/> Contributor address; City; State; Zip Code  Victorville, CA 92495	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Administrative Services Manager		Employer (See Instructions) Apple Valley Fire Protection District
Date 07/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	Amount of Contribution (\$)  \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/262 Rpt: 79/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	<b>7</b> Amount of Contribution (\$)  \$14.29
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Integrus Medical Group
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	Amount of Contribution (\$)  \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	Amount of Contribution (\$)  \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	Amount of Contribution (\$)  \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garton, Theresa <hr/> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131	Amount of Contribution (\$)  \$14.29
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/262 Rpt: 80/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rockport, TX 78382	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer Director		<b>9</b> Employer (See Instructions) Capital City Village
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code  Rockport, TX 78382	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code  Rockport, TX 78382	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code  Rockport, TX 78382	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/262 Rpt: 81/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilson, Bonnie <hr/> <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer Director		<b>9</b> Employer (See Instructions) Capital City Village
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/262 Rpt: 82/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Vashon, WA 98070	<b>7</b> Amount of Contribution (\$)  \$6.25
<b>8</b> Principal occupation / Job title (See Instructions) Ad tech		<b>9</b> Employer (See Instructions) ISpot.tv
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giusti, Sara <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions) Ad tech		Employer (See Instructions) ISpot.tv
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glassman, Susan <hr/> Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glassman, Susan <hr/> Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glassman, Susan <hr/> Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/262 Rpt: 83/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glassman, Susan	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>6</b> Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glassman, Susan	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307		
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#: _____ ) Glassman, Susan	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  CHESTNUT RIDGE, NY 10977-6307		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goerner, Jon	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Outlines Menswear
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Elk Grove, CA 95624		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/262 Rpt: 84/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach <hr/> <b>6</b> Contributor address; City; State; Zip Code  Elk Grove, CA 95624	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) EGUSD
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code  Elk Grove, CA 95624	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code  Elk Grove, CA 95624	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code  Elk Grove, CA 95624	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code  Elk Grove, CA 95624	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) EGUSD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/262 Rpt: 85/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Allston, MA 02134	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Recruitment Manager		<b>9</b> Employer (See Instructions) ActBlue
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code  Allston, MA 02134	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Recruitment Manager		Employer (See Instructions) ActBlue
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code  Allston, MA 02134	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Recruitment Manager		Employer (See Instructions) ActBlue
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code  Allston, MA 02134	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Recruitment Manager		Employer (See Instructions) ActBlue
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code  Allston, MA 02134	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Recruitment Manager		Employer (See Instructions) ActBlue

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/262 Rpt: 86/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Ellie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Allston, MA 02134	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Recruitment Manager		<b>9</b> Employer (See Instructions) ActBlue
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graff, Philip <hr/> Contributor address; City; State; Zip Code  Fulton, MD 20759	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graff, Philip <hr/> Contributor address; City; State; Zip Code  Fulton, MD 20759	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graff, Philip <hr/> Contributor address; City; State; Zip Code  Fulton, MD 20759	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graff, Philip <hr/> Contributor address; City; State; Zip Code  Fulton, MD 20759	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/262 Rpt: 87/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fulton, MD 20759	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Data Scientist		<b>9</b> Employer (See Instructions) JHU APL
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code  Fulton, MD 20759	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/262 Rpt: 88/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gratter, Anthony <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Brewery Sales Representative		<b>9</b> Employer (See Instructions) Wallenpaupack Brewing Co
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/262 Rpt: 89/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) OLPR
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guilford, Caitlin <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55406	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) OLPR
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/262 Rpt: 90/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98102	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Psychotherapist		<b>9</b> Employer (See Instructions) Self
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98102	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/262 Rpt: 91/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>6</b> Contributor address; City; State; Zip Code  Thornton, CO 80241		
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Medtronic
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Thornton, CO 80241		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Thornton, CO 80241		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Thornton, CO 80241		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Thornton, CO 80241		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/262 Rpt: 92/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haisfield, Misty <hr/> <b>6</b> Contributor address; City; State; Zip Code  Thornton, CO 80241	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Medtronic
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, George <hr/> Contributor address; City; State; Zip Code  Issaquah, WA 98029	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, George <hr/> Contributor address; City; State; Zip Code  Issaquah, WA 98029	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, George <hr/> Contributor address; City; State; Zip Code  Issaquah, WA 98029	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, George <hr/> Contributor address; City; State; Zip Code  Issaquah, WA 98029	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/262 Rpt: 93/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George	<b>7</b> Amount of Contribution (\$) \$3.13
	<b>6</b> Contributor address; City; State; Zip Code  Issaquah, WA 98029	
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) Self
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George	Amount of Contribution (\$) \$3.13
	Contributor address; City; State; Zip Code  Issaquah, WA 98029	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy	Amount of Contribution (\$) \$2.86
	Contributor address; City; State; Zip Code  Corvallis, OR 97330	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy	Amount of Contribution (\$) \$3.12
	Contributor address; City; State; Zip Code  Corvallis, OR 97330	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Amy	Amount of Contribution (\$) \$2.86
	Contributor address; City; State; Zip Code  Corvallis, OR 97330	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Oregon Health Sciences University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/262 Rpt: 94/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corvallis, OR 97330	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions) Oregon Health Sciences University
<b>Date</b> 09/11/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>Contributor address; City; State; Zip Code</b>  Corvallis, OR 97330	<b>Amount of Contribution (\$)</b>  \$2.86
<b>Principal occupation / Job title (See Instructions)</b> Student		<b>Employer (See Instructions)</b> Oregon Health Sciences University
<b>Date</b> 09/26/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>Contributor address; City; State; Zip Code</b>  Corvallis, OR 97330	<b>Amount of Contribution (\$)</b>  \$3.12
<b>Principal occupation / Job title (See Instructions)</b> Student		<b>Employer (See Instructions)</b> Oregon Health Sciences University
<b>Date</b> 10/11/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>Contributor address; City; State; Zip Code</b>  Corvallis, OR 97330	<b>Amount of Contribution (\$)</b>  \$2.86
<b>Principal occupation / Job title (See Instructions)</b> Student		<b>Employer (See Instructions)</b> Oregon Health Sciences University
<b>Date</b> 10/26/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>Contributor address; City; State; Zip Code</b>  Corvallis, OR 97330	<b>Amount of Contribution (\$)</b>  \$3.12
<b>Principal occupation / Job title (See Instructions)</b> Student		<b>Employer (See Instructions)</b> Oregon Health Sciences University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/262 Rpt: 95/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Amy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corvallis, OR 97330	<b>7</b> Amount of Contribution (\$)  \$2.86
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions) Oregon Health Sciences University
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy <hr/> Contributor address; City; State; Zip Code  Chico, CA 95926	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy <hr/> Contributor address; City; State; Zip Code  Chico, CA 95926	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy <hr/> Contributor address; City; State; Zip Code  Chico, CA 95926	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy <hr/> Contributor address; City; State; Zip Code  Chico, CA 95926	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/262 Rpt: 96/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy	<b>7</b> Amount of Contribution (\$) \$7.14
<b>6</b> Contributor address; City; State; Zip Code  Chico, CA 95926		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harding, Judy	Amount of Contribution (\$) \$7.14
Contributor address; City; State; Zip Code  Chico, CA 95926		
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#: _____ ) Harrington, Joseph	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code  San Diego, CA 92102		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joseph	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code  San Diego, CA 92102		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joseph	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code  San Diego, CA 92102		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joseph <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Diego, CA 92102	<b>7</b> Amount of Contribution (\$)  \$4.55
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Foresight Sports
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92102	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92102	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> Contributor address; City; State; Zip Code  Dubuque, IA 52001	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> Contributor address; City; State; Zip Code  Dubuque, IA 52001	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/262 Rpt: 98/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dubuque, IA 52001	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Financial advisor		<b>9</b> Employer (See Instructions) DB&T
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> Contributor address; City; State; Zip Code  Dubuque, IA 52001	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> Contributor address; City; State; Zip Code  Dubuque, IA 52001	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hauser, Polly <hr/> Contributor address; City; State; Zip Code  Dubuque, IA 52001	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/262 Rpt: 99/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haverkamp, Rita M <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Cajon, CA 92020	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Rn		<b>9</b> Employer (See Instructions) Self
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haverkamp, Rita M <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 07/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Matthew <hr/> Contributor address; City; State; Zip Code  Arlington, VA 22201	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Booz Allen Hamilton

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/262 Rpt: 100/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Matthew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Arlington, VA 22201	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Booz Allen Hamilton
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/262 Rpt: 101/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	<b>7</b> Amount of Contribution (\$)  \$5.72
<b>8</b> Principal occupation / Job title (See Instructions) Drug Safety Manger		<b>9</b> Employer (See Instructions) Ultragenyx
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herrick, Steve <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$5.72
Principal occupation / Job title (See Instructions) Drug Safety Manger		Employer (See Instructions) Ultragenyx
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Randy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Randy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Randy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/262 Rpt: 102/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Randy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Winemaker		<b>9</b> Employer (See Instructions) C.L. Butaud Wines
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Randy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions) C.L. Butaud Wines
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> Contributor address; City; State; Zip Code  Belmont, AP 02280	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> Contributor address; City; State; Zip Code  Belmont, AP 02280	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> Contributor address; City; State; Zip Code  Belmont, AP 02280	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/262 Rpt: 103/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Belmont, AP 02280	<b>7</b> Amount of Contribution (\$)  \$1.87
<b>8</b> Principal occupation / Job title (See Instructions) Sales Management		<b>9</b> Employer (See Instructions) BD
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> Contributor address; City; State; Zip Code  Belmont, AP 02280	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, James <hr/> Contributor address; City; State; Zip Code  Belmont, AP 02280	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> Contributor address; City; State; Zip Code  Everett, WA 98208	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> Contributor address; City; State; Zip Code  Everett, WA 98208	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/262 Rpt: 104/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Everett, WA 98208	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Senior Management Analyst		<b>9</b> Employer (See Instructions) SSA
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> Contributor address; City; State; Zip Code  Everett, WA 98208	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> Contributor address; City; State; Zip Code  Everett, WA 98208	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holstein, Susan <hr/> Contributor address; City; State; Zip Code  Everett, WA 98208	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horan, Sue <hr/> Contributor address; City; State; Zip Code  Robbinsville, NJ 08690	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Director PV Systems		Employer (See Instructions) Acadia Pharmaceutical



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/262 Rpt: 105/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horan, Sue <hr/> <b>6</b> Contributor address; City; State; Zip Code  Robbinsville, NJ 08690	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Director PV Systems		<b>9</b> Employer (See Instructions) Acadia Pharmaceutical
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horan, Sue <hr/> Contributor address; City; State; Zip Code  Robbinsville, NJ 08690	Amount of Contribution (\$)  \$1.00
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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hubmer, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort worth, TX 76109	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Independent contractor
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code  Fort worth, TX 76109	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Independent contractor
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<b>6</b> Contributor address; City; State; Zip Code  Fort worth, TX 76109		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Independent contractor
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Brookline, MA 02446		
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Brookline, MA 02446		
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Brookline, MA 02446		
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William	Amount of Contribution (\$)  \$3.57
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Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's

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Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Isgur, Lea <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johns, Kathy <hr/> Contributor address; City; State; Zip Code  Littleton, CO 80125	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johns, Kathy <hr/> Contributor address; City; State; Zip Code  Littleton, CO 80125	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johns, Kathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Littleton, CO 80125	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johns, Kathy <hr/> Contributor address; City; State; Zip Code  Littleton, CO 80125	Amount of Contribution (\$)  \$1.00
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Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Susan <hr/> Contributor address; City; State; Zip Code  Montclair, NJ 07043	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Montclair, NJ 07043	<b>7</b> Amount of Contribution (\$)  \$2.09
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Susan <hr/> Contributor address; City; State; Zip Code  Montclair, NJ 07043	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Susan <hr/> Contributor address; City; State; Zip Code  Montclair, NJ 07043	Amount of Contribution (\$)  \$2.09
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<b>4</b> Date 07/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Riland <hr/> <b>6</b> Contributor address; City; State; Zip Code  Semmes, AL 36575	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Chemist		<b>9</b> Employer (See Instructions) Evonik
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Riland <hr/> Contributor address; City; State; Zip Code  Semmes, AL 36575	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Riland <hr/> Contributor address; City; State; Zip Code  Semmes, AL 36575	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Riland <hr/> Contributor address; City; State; Zip Code  Semmes, AL 36575	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Riland <hr/> Contributor address; City; State; Zip Code  Semmes, AL 36575	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Evonik

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<b>8</b> Principal occupation / Job title (See Instructions) Chemist		<b>9</b> Employer (See Instructions) Evonik
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joyce, Greg <hr/> Contributor address; City; State; Zip Code  South Boston, MA 02127	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joyce, Greg <hr/> Contributor address; City; State; Zip Code  South Boston, MA 02127	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joyce, Greg <hr/> Contributor address; City; State; Zip Code  South Boston, MA 02127	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joyce, Greg <hr/> Contributor address; City; State; Zip Code  South Boston, MA 02127	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies



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<b>8</b> Principal occupation / Job title (See Instructions) Financial Analyst		<b>9</b> Employer (See Instructions) Akamai Technologies
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joyce, Greg <hr/> Contributor address; City; State; Zip Code  South Boston, MA 02127	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kane, Ita <hr/> Contributor address; City; State; Zip Code  Boston, MA 02127	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kane, Ita <hr/> Contributor address; City; State; Zip Code  Boston, MA 02127	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kane, Ita <hr/> Contributor address; City; State; Zip Code  Boston, MA 02127	Amount of Contribution (\$)  \$2.86
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Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ketchaver, James <hr/> Contributor address; City; State; Zip Code  Lakewood, OH 44107	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager of IT		Employer (See Instructions) Fathom
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ketchaver, James <hr/> Contributor address; City; State; Zip Code  Lakewood, OH 44107	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager of IT		Employer (See Instructions) Fathom

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<b>8</b> Principal occupation / Job title (See Instructions) Manager of IT		<b>9</b> Employer (See Instructions) Fathom
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ketchaver, James <hr/> Contributor address; City; State; Zip Code  Lakewood, OH 44107	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager of IT		Employer (See Instructions) Fathom
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ketchaver, James <hr/> Contributor address; City; State; Zip Code  Lakewood, OH 44107	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager of IT		Employer (See Instructions) Fathom
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code  West Orange, NJ 07052	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code  West Orange, NJ 07052	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code  West Orange, NJ 07052	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code  West Orange, NJ 07052	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klein, Grant <hr/> Contributor address; City; State; Zip Code  Denver, CO 80223	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis

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<b>4</b> Date 08/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klein, Grant <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denver, CO 80223	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Associate		<b>9</b> Employer (See Instructions) Prologis
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klein, Grant <hr/> Contributor address; City; State; Zip Code  Denver, CO 80223	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klein, Grant <hr/> Contributor address; City; State; Zip Code  Denver, CO 80223	Amount of Contribution (\$)  \$3.13
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<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klodginski, Robert	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  San antonio, TX 78212		
<b>8</b> Principal occupation / Job title (See Instructions) Design manager		<b>9</b> Employer (See Instructions) Timberlyne
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koman, James	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94608		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koman, James	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94608		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koman, James	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94608		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Zymergen
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/262 Rpt: 119/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tumwater, WA 98512	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Administration		<b>9</b> Employer (See Instructions) Royal Restrooms
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Livermore, CA 94550	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Tumwater, WA 98512	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Royal Restrooms
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Livermore, CA 94550	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Tumwater, WA 98512	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Royal Restrooms

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/262 Rpt: 120/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livermore, CA 94550	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Nanny		<b>9</b> Employer (See Instructions) Reynolds Family
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Tumwater, WA 98512	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Royal Restrooms
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Livermore, CA 94550	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Tumwater, WA 98512	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Royal Restrooms
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> Contributor address; City; State; Zip Code  Livermore, CA 94550	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Reynolds Family



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/262 Rpt: 121/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mar, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tumwater, WA 98512	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Administration		<b>9</b> Employer (See Instructions) Royal Restrooms
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> Contributor address; City; State; Zip Code  West Chester, TX 19380	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> Contributor address; City; State; Zip Code  West Chester, TX 19380	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> Contributor address; City; State; Zip Code  West Chester, TX 19380	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> Contributor address; City; State; Zip Code  West Chester, TX 19380	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/262 Rpt: 122/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  West Chester, TX 19380	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Software QA Manager		<b>9</b> Employer (See Instructions) Scoir Inc
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahm, Paul <hr/> Contributor address; City; State; Zip Code  West Chester, TX 19380	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97212	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97212	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97212	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/262 Rpt: 123/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97212	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions) none
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97212	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lance, Julie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97212	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss <hr/> Contributor address; City; State; Zip Code  Port Townsend, WA 98368	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss <hr/> Contributor address; City; State; Zip Code  Port Townsend, WA 98368	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 121/262 Rpt: 124/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Port Townsend, WA 98368		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langlois, Ss	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lapp, Jan	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/262 Rpt: 125/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
<b>8</b> Principal occupation / Job title (See Instructions) Administrative Asst.		<b>9</b> Employer (See Instructions) Winthrop & Weinstine
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/262 Rpt: 126/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Harrison, NJ 07029	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Cybersecurity Analyst		<b>9</b> Employer (See Instructions) JP Morgan Chase
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 124/262 Rpt: 127/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laudadio, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Harrison, NJ 07029	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Cybersecurity Analyst		<b>9</b> Employer (See Instructions) JP Morgan Chase
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/262 Rpt: 128/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Therapist		<b>9</b> Employer (See Instructions) Self
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code  Palos Hills, IL 60465	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 126/262 Rpt: 129/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon	<b>7</b> Amount of Contribution (\$)  \$3.58
<b>6</b> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062		
<b>8</b> Principal occupation / Job title (See Instructions) Producer		<b>9</b> Employer (See Instructions) MLB Network
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon	Amount of Contribution (\$)  \$3.58
Contributor address; City; State; Zip Code  North Plainfield, NJ 07062		
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laureano, Jonathon	Amount of Contribution (\$)  \$3.58
Contributor address; City; State; Zip Code  North Plainfield, NJ 07062		
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Fairfax, VA 22032		
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Fairfax, VA 22032		
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/262 Rpt: 130/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fairfax, VA 22032	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Nurse Practitioner		<b>9</b> Employer (See Instructions) George Mason University
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Patrice <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/262 Rpt: 131/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liljestrom, Allison <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jackson, WY 83002	<b>7</b> Amount of Contribution (\$)  \$1.24
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
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#: _____ ) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
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#: _____ ) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/262 Rpt: 132/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi	<b>7</b> Amount of Contribution (\$) \$5.40
<b>6</b> Contributor address; City; State; Zip Code  Boston, MA 02134		
<b>8</b> Principal occupation / Job title (See Instructions) Phd Student		<b>9</b> Employer (See Instructions) Harvard University
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi	Amount of Contribution (\$) \$5.40
Contributor address; City; State; Zip Code  Boston, MA 02134		
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi	Amount of Contribution (\$) \$5.40
Contributor address; City; State; Zip Code  Boston, MA 02134		
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi	Amount of Contribution (\$) \$5.40
Contributor address; City; State; Zip Code  Boston, MA 02134		
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi	Amount of Contribution (\$) \$5.40
Contributor address; City; State; Zip Code  Boston, MA 02134		
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/262 Rpt: 133/291
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<b>4</b> Date 12/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipton, Avi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boston, MA 02134	<b>7</b> Amount of Contribution (\$)  \$5.40
<b>8</b> Principal occupation / Job title (See Instructions) Phd Student		<b>9</b> Employer (See Instructions) Harvard University
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liu, Heather <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85249	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions) Speech therapist		Employer (See Instructions) Heather liu
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Liu, Heather <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85249	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions) Speech therapist		Employer (See Instructions) Encompass
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucas, Michael <hr/> Contributor address; City; State; Zip Code  Buda, TX 78610	Amount of Contribution (\$)  \$11.11
Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucas, Michael <hr/> Contributor address; City; State; Zip Code  Buda, TX 78610	Amount of Contribution (\$)  \$11.11
Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>4</b> Date 09/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucas, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Buda, TX 78610	<b>7</b> Amount of Contribution (\$)  \$11.11
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Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lupian, Anthony <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	<b>7</b> Amount of Contribution (\$)  \$6.25
<b>8</b> Principal occupation / Job title (See Instructions) Medical Social Worker		<b>9</b> Employer (See Instructions) Mission Hospice
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Medical Social Worker		Employer (See Instructions) Mission Hospice
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<b>8</b> Principal occupation / Job title (See Instructions) Medical Social Worker		<b>9</b> Employer (See Instructions) Mission Hospice
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code  Elizabeth, IN 47117	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code  Elizabeth, IN 47117	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
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Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
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Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/262 Rpt: 138/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MOORE, KEVIN <hr/> <b>6</b> Contributor address; City; State; Zip Code  Elizabeth, IN 47117	<b>7</b> Amount of Contribution (\$)  \$2.86
<b>8</b> Principal occupation / Job title (See Instructions) cancer registry-ctr		<b>9</b> Employer (See Instructions) u of I hospital
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code  Elizabeth, IN 47117	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) cancer registry-ctr		Employer (See Instructions) u of I hospital
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/262 Rpt: 139/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20015	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) PECF
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacIntyre, Martin <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PECF
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code  Kissimmee, FL 34741	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code  Kissimmee, FL 34741	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/262 Rpt: 140/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>8</b> Principal occupation / Job title (See Instructions) System Analyst		<b>9</b> Employer (See Instructions) Disney Cruise Line
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code  Kissimmee, FL 34741	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code  Kissimmee, FL 34741	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) CSU
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahdavi, Jennifer <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malin, Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/262 Rpt: 142/291
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<b>8</b> Principal occupation / Job title (See Instructions) Expert Consultant		<b>9</b> Employer (See Instructions) self
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malin, Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malin, Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malin, Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malin, Jane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self

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<b>4</b> Date 07/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mangiamele, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11226	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Client Services Specialist		<b>9</b> Employer (See Instructions) SeatGeek
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mangiamele, David <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11226	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Client Services Specialist		Employer (See Instructions) SeatGeek
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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mangiamele, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11226	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Client Services Specialist		<b>9</b> Employer (See Instructions) SeatGeek
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/262 Rpt: 145/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> <b>6</b> Contributor address; City; State; Zip Code  Alexandria, VA 22314	<b>7</b> Amount of Contribution (\$)  \$5.56
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maturo, Clark <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11249	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ViralGains
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maturo, Clark <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11249	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ViralGains
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maturo, Clark <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11249	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ViralGains

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/262 Rpt: 146/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maturo, Clark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11249	<b>7</b> Amount of Contribution (\$)  \$2.77
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) ViralGains
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629	Amount of Contribution (\$)  \$2.78
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#: _____ ) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629	Amount of Contribution (\$)  \$2.78
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#: _____ ) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629	Amount of Contribution (\$)  \$2.78
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#: _____ ) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/262 Rpt: 147/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayfield, Fran	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>6</b> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayfield, Fran	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Farmington, NM 87401-8629		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	Amount of Contribution (\$)  \$1.11
Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	Amount of Contribution (\$)  \$1.11
Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	Amount of Contribution (\$)  \$1.11
Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/262 Rpt: 148/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	<b>7</b> Amount of Contribution (\$)  \$1.11
<b>6</b> Contributor address; City; State; Zip Code  Edina, MN 55436		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) State of Minnesota
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	Amount of Contribution (\$)  \$1.11
Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Daniel	Amount of Contribution (\$)  \$1.11
Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/262 Rpt: 149/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) Zynga Inc
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCann, Sean	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  New York, NY 10019		
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/262 Rpt: 150/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10019	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Flight attendant		<b>9</b> Employer (See Instructions) Delta air Lines
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10019	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10019	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10019	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code  New York, NY 10019	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta air Lines

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/262 Rpt: 151/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKee, Sean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98122	<b>7</b> Amount of Contribution (\$)  \$3.75
<b>8</b> Principal occupation / Job title (See Instructions) CFS		<b>9</b> Employer (See Instructions) US Census
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKee, Sean <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98122	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) CFS		Employer (See Instructions) US Census
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664	Amount of Contribution (\$)  \$4.16
Principal occupation / Job title (See Instructions) Senior Sales Engineer		Employer (See Instructions) Tessian
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664	Amount of Contribution (\$)  \$4.16
Principal occupation / Job title (See Instructions) Senior Sales Engineer		Employer (See Instructions) Tessian
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664	Amount of Contribution (\$)  \$4.16
Principal occupation / Job title (See Instructions) Senior Sales Engineer		Employer (See Instructions) Tessian

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 149/262 Rpt: 152/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78664	<b>7</b> Amount of Contribution (\$)  \$4.16
<b>8</b> Principal occupation / Job title (See Instructions) Senior Sales Engineer		<b>9</b> Employer (See Instructions) Tessian
<b>Date</b> 11/10/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> <b>Contributor address; City; State; Zip Code</b>  Round Rock, TX 78664	<b>Amount of Contribution (\$)</b>  \$4.16
<b>Principal occupation / Job title (See Instructions)</b> Senior Sales Engineer		<b>Employer (See Instructions)</b> Tessian
<b>Date</b> 12/10/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNash, Thomas <hr/> <b>Contributor address; City; State; Zip Code</b>  Round Rock, TX 78664	<b>Amount of Contribution (\$)</b>  \$4.16
<b>Principal occupation / Job title (See Instructions)</b> Senior Sales Engineer		<b>Employer (See Instructions)</b> Tessian
<b>Date</b> 07/02/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach <hr/> <b>Contributor address; City; State; Zip Code</b>  Valley Village, CA 91607	<b>Amount of Contribution (\$)</b>  \$1.00
<b>Principal occupation / Job title (See Instructions)</b> Actor		<b>Employer (See Instructions)</b> Self
<b>Date</b> 08/02/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach <hr/> <b>Contributor address; City; State; Zip Code</b>  Valley Village, CA 91607	<b>Amount of Contribution (\$)</b>  \$1.00
<b>Principal occupation / Job title (See Instructions)</b> Actor		<b>Employer (See Instructions)</b> Self



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 150/262 Rpt: 153/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Valley Village, CA 91607		
<b>8</b> Principal occupation / Job title (See Instructions) Actor		<b>9</b> Employer (See Instructions) Self
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Valley Village, CA 91607		
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Valley Village, CA 91607		
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendelovich, Lilach	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Valley Village, CA 91607		
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral	Amount of Contribution (\$)  \$3.00
Contributor address; City; State; Zip Code  Austin, TX 78756		
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 151/262 Rpt: 154/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78756	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) special ed consultant		<b>9</b> Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Cyral <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) special ed consultant		Employer (See Instructions) Tx School for the Blind and Visually Impaired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/262 Rpt: 155/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	<b>7</b> Amount of Contribution (\$)  \$2.08
<b>6</b> Contributor address; City; State; Zip Code  Cheney, WA 99004		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	Amount of Contribution (\$)  \$2.08
Contributor address; City; State; Zip Code  Cheney, WA 99004		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	Amount of Contribution (\$)  \$2.08
Contributor address; City; State; Zip Code  Cheney, WA 99004		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	Amount of Contribution (\$)  \$2.08
Contributor address; City; State; Zip Code  Cheney, WA 99004		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	Amount of Contribution (\$)  \$2.08
Contributor address; City; State; Zip Code  Cheney, WA 99004		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/262 Rpt: 156/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Patrick	<b>7</b> Amount of Contribution (\$)  \$2.08
<b>6</b> Contributor address; City; State; Zip Code  Cheney, WA 99004		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millstone, Sacha	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Denver, TX 80206		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millstone, Sacha	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Denver, TX 80206		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millstone, Sacha	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Denver, TX 80206		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millstone, Sacha	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Denver, TX 80206		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Millstone Evans Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/262 Rpt: 157/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Molitch-Hou, Ethan <hr/> <b>6</b> Contributor address; City; State; Zip Code  FPO, AP 96362-2599	<b>7</b> Amount of Contribution (\$)  \$14.28
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Emory
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code  FPO, AP 96362-2599	Amount of Contribution (\$)  \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code  FPO, AP 96362-2599	Amount of Contribution (\$)  \$14.28
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory
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Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory
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Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emory

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/262 Rpt: 158/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Molitch-Hou, Ethan <hr/> <b>6</b> Contributor address; City; State; Zip Code  FPO, AP 96362-2599	<b>7</b> Amount of Contribution (\$)  \$14.28
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Emory
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/262 Rpt: 159/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code  Valencia, CA 91354	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code  Valencia, CA 91354	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code  Valencia, CA 91354	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti

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<b>4</b> Date 10/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> <b>6</b> Contributor address; City; State; Zip Code  Valencia, CA 91354	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Learning & Development Manager		<b>9</b> Employer (See Instructions) Protiviti
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code  Valencia, CA 91354	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code  Valencia, CA 91354	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Learning & Development Manager		Employer (See Instructions) Protiviti
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32601	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32601	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF



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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gainesville, FL 32601	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) ARNP		<b>9</b> Employer (See Instructions) UF
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32601	Amount of Contribution (\$)  \$12.50
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Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32601	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32601	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/262 Rpt: 162/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Compliance Manager		<b>9</b> Employer (See Instructions) JPMorgan Chase
Date 09/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	Amount of Contribution (\$)  \$3.12
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Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Compliance Manager		Employer (See Instructions) JPMorgan Chase

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/262 Rpt: 163/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
<b>8</b> Principal occupation / Job title (See Instructions) Administrator		<b>9</b> Employer (See Instructions) George Washington University
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/262 Rpt: 164/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neurohr, Rachel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20010-2192	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Administrator		<b>9</b> Employer (See Instructions) George Washington University
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/262 Rpt: 165/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78748	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Stripe Inc.
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newton, Taylor <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Stripe Inc.
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95135	Amount of Contribution (\$)  \$1.00
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#: _____ ) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95135	Amount of Contribution (\$)  \$1.00
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#: _____ ) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95135	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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**SCHEDULE A1**

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<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nispel, Shanna	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95135		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nispel, Shanna	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Jose, CA 95135		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nispel, Shanna	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Jose, CA 95135		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Millburn, NJ 07041		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Millburn, NJ 07041		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb

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**SCHEDULE A1**

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<b>4</b> Date 09/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Millburn, NJ 07041	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Bristol Myers Squibb
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code  Millburn, NJ 07041	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code  Millburn, NJ 07041	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code  Millburn, NJ 07041	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olivares, Juventino <hr/> Contributor address; City; State; Zip Code  Lavon, TX 75166	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 165/262 Rpt: 168/291
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<b>4</b> Date 11/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olivares, Juventino <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lavon, TX 75166	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code  Sandy Hook, CT 06482	Amount of Contribution (\$)  \$2.27
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code  Sandy Hook, CT 06482	Amount of Contribution (\$)  \$2.27
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code  Sandy Hook, CT 06482	Amount of Contribution (\$)  \$2.27
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
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Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed



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<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
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Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/262 Rpt: 170/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code  Lake Clear, NY 12945	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/262 Rpt: 171/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Little Rock, AR 72202	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Pappalardo Media Co
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94110	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/262 Rpt: 172/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94110		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Francisco, CA 94110		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Francisco, CA 94110		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Francisco, CA 94110		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pappas, Kristina	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Francisco, CA 94110		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/262 Rpt: 173/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perelman, Jenna <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	<b>7</b> Amount of Contribution (\$)  \$2.23
<b>8</b> Principal occupation / Job title (See Instructions) Product manager		<b>9</b> Employer (See Instructions) Ohmconnect
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perelman, Jenna <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$2.23
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Ohmconnect
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perelman, Jenna <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$2.23
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Ohmconnect
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pereyra, Carolyn <hr/> Contributor address; City; State; Zip Code  Marlton, NJ 08053	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 171/262 Rpt: 174/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Andrea <hr/> <b>6</b> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	Amount of Contribution (\$)  \$3.13
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#: _____ ) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	Amount of Contribution (\$)  \$3.13
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#: _____ ) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	Amount of Contribution (\$)  \$3.13
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#: _____ ) Peterson, Andrea <hr/> Contributor address; City; State; Zip Code  Friday Harbor, WA 98250	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/262 Rpt: 175/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> <b>6</b> Contributor address; City; State; Zip Code  Crownsville, MD 21032	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Horse Trainer		<b>9</b> Employer (See Instructions) self employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 173/262 Rpt: 176/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrichor, Emily <hr/> <b>6</b> Contributor address; City; State; Zip Code  Crownsville, MD 21032	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Horse Trainer		<b>9</b> Employer (See Instructions) self employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60615	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60615	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60615	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phalen, Lizanne <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60615	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 174/262 Rpt: 177/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lawndale, CA 90260	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$1.00</span>
<b>8</b> Principal occupation / Job title (See Instructions) computer consultant		<b>9</b> Employer (See Instructions) Prosum Inc.
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> Contributor address; City; State; Zip Code  Lawndale, CA 90260	Amount of Contribution (\$) <span style="float:right">\$1.00</span>
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> Contributor address; City; State; Zip Code  Lawndale, CA 90260	Amount of Contribution (\$) <span style="float:right">\$1.00</span>
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> Contributor address; City; State; Zip Code  Lawndale, CA 90260	Amount of Contribution (\$) <span style="float:right">\$1.00</span>
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> Contributor address; City; State; Zip Code  Lawndale, CA 90260	Amount of Contribution (\$) <span style="float:right">\$1.00</span>
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/262 Rpt: 178/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevas, Frances <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lawndale, CA 90260	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) computer consultant		<b>9</b> Employer (See Instructions) Prosum Inc.
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 176/262 Rpt: 179/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Hilo, HI 96720		
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) Realtor
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Przewlocki, Sunita	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Hilo, HI 96720		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pumfrey, William Ross	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78736		
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#: _____ ) Quinn, Ryan	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Selkirk, NY 12158		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Ryan	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Selkirk, NY 12158		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 177/262 Rpt: 180/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Ryan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Selkirk, NY 12158	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Stonewall Defense LLC
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Ryan <hr/> Contributor address; City; State; Zip Code  Selkirk, NY 12158	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Ryan <hr/> Contributor address; City; State; Zip Code  Selkirk, NY 12158	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Ryan <hr/> Contributor address; City; State; Zip Code  Selkirk, NY 12158	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Stonewall Defense LLC
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> Contributor address; City; State; Zip Code  Marion, VA 24354	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/262 Rpt: 181/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Marion, VA 24354	<b>7</b> Amount of Contribution (\$)  \$3.58
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> Contributor address; City; State; Zip Code  Marion, VA 24354	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> Contributor address; City; State; Zip Code  Marion, VA 24354	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> Contributor address; City; State; Zip Code  Marion, VA 24354	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahn, Karen <hr/> Contributor address; City; State; Zip Code  Marion, VA 24354	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 179/262 Rpt: 182/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> <b>6</b> Contributor address; City; State; Zip Code  morganville, NJ 07751	<b>7</b> Amount of Contribution (\$)  \$7.15
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Self
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/262 Rpt: 183/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> <b>6</b> Contributor address; City; State; Zip Code  morganville, NJ 07751	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Self
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$7.15
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 181/262 Rpt: 184/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> <b>6</b> Contributor address; City; State; Zip Code  morganville, NJ 07751	<b>7</b> Amount of Contribution (\$)  \$7.15
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rajaraman, Ravindran <hr/> Contributor address; City; State; Zip Code  morganville, NJ 07751	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90807	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90807	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90807	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/262 Rpt: 185/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90807		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Los Angeles County
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Los Angeles, CA 90807		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redgate, Christopher	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Los Angeles, CA 90807		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reppond, Judy	Amount of Contribution (\$)  \$2.22
Contributor address; City; State; Zip Code  Rialto, CA 92376		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Unitek
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reppond, Judy	Amount of Contribution (\$)  \$2.22
Contributor address; City; State; Zip Code  Rialto, CA 92376		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Unitek

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 183/262 Rpt: 186/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reppond, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rialto, CA 92376	<b>7</b> Amount of Contribution (\$)  \$2.22
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) Unitek
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/262 Rpt: 187/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		<b>9</b> Employer (See Instructions) League of Women Voters - SLC
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94114	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94114	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94114	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/262 Rpt: 188/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94114	<b>7</b> Amount of Contribution (\$)  \$1.88
<b>8</b> Principal occupation / Job title (See Instructions) tech writer		<b>9</b> Employer (See Instructions) Apple Inc
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94114	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricci, Mary <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94114	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) tech writer		Employer (See Instructions) Apple Inc
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> Contributor address; City; State; Zip Code  Washington, DC 20009	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> Contributor address; City; State; Zip Code  Washington, DC 20009	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/262 Rpt: 189/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20009	<b>7</b> Amount of Contribution (\$)  \$2.86
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Reingold
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> Contributor address; City; State; Zip Code  Washington, DC 20009	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> Contributor address; City; State; Zip Code  Washington, DC 20009	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Madeline <hr/> Contributor address; City; State; Zip Code  Washington, DC 20009	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/262 Rpt: 190/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97213	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Operational Strategy		<b>9</b> Employer (See Instructions) Self
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code  Portland, OR 97213	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 188/262 Rpt: 191/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> <b>6</b> Contributor address; City; State; Zip Code  Towson, MD 21286	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Planner		<b>9</b> Employer (See Instructions) RK&K
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/262 Rpt: 192/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rolf, Brittany <hr/> <b>6</b> Contributor address; City; State; Zip Code  Towson, MD 21286	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Planner		<b>9</b> Employer (See Instructions) RK&K
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roman, Marisa <hr/> Contributor address; City; State; Zip Code  Charlestown, MA 02129	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Tapestry Networks
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code  Boston, MA 02116	Amount of Contribution (\$)  \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code  Boston, MA 02116	Amount of Contribution (\$)  \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code  Boston, MA 02116	Amount of Contribution (\$)  \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 190/262 Rpt: 193/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart	<b>7</b> Amount of Contribution (\$)  \$31.25
<b>6</b> Contributor address; City; State; Zip Code  Boston, MA 02116		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Sanebox
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart	Amount of Contribution (\$)  \$31.25
Contributor address; City; State; Zip Code  Boston, MA 02116		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roseman, Stuart	Amount of Contribution (\$)  \$31.25
Contributor address; City; State; Zip Code  Boston, MA 02116		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Sanebox
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosenblum, Holly	Amount of Contribution (\$)  \$1.87
Contributor address; City; State; Zip Code  Walnut Creek, CA 94598		
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) California Academy of sciences
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosenblum, Holly	Amount of Contribution (\$)  \$1.87
Contributor address; City; State; Zip Code  Walnut Creek, CA 94598		
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) California Academy of sciences

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 191/262 Rpt: 194/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosenblum, Holly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Walnut Creek, CA 94598	<b>7</b> Amount of Contribution (\$)  \$1.87
<b>8</b> Principal occupation / Job title (See Instructions) Biologist		<b>9</b> Employer (See Instructions) California Academy of sciences
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> Contributor address; City; State; Zip Code  Zanesville, OH 43701	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> Contributor address; City; State; Zip Code  Zanesville, OH 43701	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> Contributor address; City; State; Zip Code  Zanesville, OH 43701	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> Contributor address; City; State; Zip Code  Zanesville, OH 43701	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 192/262 Rpt: 195/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> <b>6</b> Contributor address; City; State; Zip Code  Zanesville, OH 43701	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) School Age Literacy Specialist		<b>9</b> Employer (See Instructions) Muskingum County Library System
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roush, Cory <hr/> Contributor address; City; State; Zip Code  Zanesville, OH 43701	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) School Age Literacy Specialist		Employer (See Instructions) Muskingum County Library System
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code  APO, AE 09114	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code  APO, AE 09114	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code  APO, AE 09114	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 193/262 Rpt: 196/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> <b>6</b> Contributor address; City; State; Zip Code  APO, AE 09114	<b>7</b> Amount of Contribution (\$)  \$2.77
<b>8</b> Principal occupation / Job title (See Instructions) 12A		<b>9</b> Employer (See Instructions) US Army
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code  APO, AE 09114	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code  APO, AE 09114	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) 12A		Employer (See Instructions) US Army
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 194/262 Rpt: 197/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Brightwood, OR 97011		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Brightwood, OR 97011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Brightwood, OR 97011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Brightwood, OR 97011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Somerville, MA		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 195/262 Rpt: 198/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Somerville, MA 02143	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Facebook
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 196/262 Rpt: 199/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Cambridge, MA 02139		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) AWS
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AWS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 197/262 Rpt: 200/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanjay, Supriya <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cambridge, MA 02139	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) AWS
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scannell, Mike <hr/> Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scannell, Mike <hr/> Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scannell, Mike <hr/> Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scannell, Mike <hr/> Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 198/262 Rpt: 201/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike	<b>7</b> Amount of Contribution (\$)  \$2.50
	<b>6</b> Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	
<b>8</b> Principal occupation / Job title (See Instructions) Courier		<b>9</b> Employer (See Instructions) Fedex
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike	Amount of Contribution (\$)  \$2.50
	Contributor address; City; State; Zip Code  Petaluma, CA 94952-1615	
Principal occupation / Job title (See Instructions) Courier		Employer (See Instructions) Fedex
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 199/262 Rpt: 202/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schenck, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) CDI
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schenck, David <hr/> Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schenck, David <hr/> Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
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#: _____ ) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 200/262 Rpt: 203/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schierhorn, Carl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kent, OH 44240	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
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#: _____ ) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James <hr/> Contributor address; City; State; Zip Code  Tucson, AZ 75750	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 201/262 Rpt: 204/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James	<b>7</b> Amount of Contribution (\$)  \$1.24
<b>6</b> Contributor address; City; State; Zip Code  Tucson, AZ 75750		
<b>8</b> Principal occupation / Job title (See Instructions) Financial Analyst		<b>9</b> Employer (See Instructions) Newmark
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scotland, James	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 202/262 Rpt: 205/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Anthem, AZ 85086		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Anthem, AZ 85086		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Anthem, AZ 85086		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Anthem, AZ 85086		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Anthem, AZ 85086		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 203/262 Rpt: 206/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoufos, Jeannette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Anthem, AZ 85086	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sever, Ann <hr/> Contributor address; City; State; Zip Code  Houston, TX 77079	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 204/262 Rpt: 207/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	<b>7</b> Amount of Contribution (\$)  \$2.09
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) UVA Hospital
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA Hospital
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code  Durango, CO 81301	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code  Durango, CO 81301	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 205/262 Rpt: 208/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Georgi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Durango, CO 81301	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) None
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code  Durango, CO 81301	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code  Durango, CO 81301	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) None
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37216	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37216	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 206/262 Rpt: 209/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nashville, TN 37216	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Advertising		<b>9</b> Employer (See Instructions) Agency
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37216	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37216	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alec <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37216	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Agency
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Halley <hr/> Contributor address; City; State; Zip Code  Indianapolis, IN 46202	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 207/262 Rpt: 210/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley	<b>7</b> Amount of Contribution (\$) \$2.09
<b>6</b> Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
<b>8</b> Principal occupation / Job title (See Instructions) Advertising		<b>9</b> Employer (See Instructions) Digitas
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 208/262 Rpt: 211/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> <b>6</b> Contributor address; City; State; Zip Code  Starkville, MS 39759	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Grad Student		<b>9</b> Employer (See Instructions) Northwestern University
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> Contributor address; City; State; Zip Code  Starkville, MS 39759	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Grad Student		Employer (See Instructions) Northwestern University
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> Contributor address; City; State; Zip Code  Starkville, MS 39759	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Grad Student		Employer (See Instructions) Northwestern University
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> Contributor address; City; State; Zip Code  Starkville, MS 39759	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Grad Student		Employer (See Instructions) Northwestern University
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> Contributor address; City; State; Zip Code  Starkville, MS 39759	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Grad Student		Employer (See Instructions) Northwestern University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 209/262 Rpt: 212/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soares, Leigh <hr/> <b>6</b> Contributor address; City; State; Zip Code  Starkville, MS 39759	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Grad Student		<b>9</b> Employer (See Instructions) Northwestern University
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 210/262 Rpt: 213/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Longmont, CO 80501	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Lyft Driver		<b>9</b> Employer (See Instructions) Myself
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself
Date 07/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stekler, Beth <hr/> Contributor address; City; State; Zip Code  Washington, DC 20016-2064	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stekler, Beth <hr/> Contributor address; City; State; Zip Code  Washington, DC 20016-2064	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stekler, Beth <hr/> Contributor address; City; State; Zip Code  Washington, DC 20016-2064	Amount of Contribution (\$)  \$7.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 211/262 Rpt: 214/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stekler, Beth <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20016-2064	<b>7</b> Amount of Contribution (\$)  \$7.14
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code  New York, NY 10023	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code  New York, NY 10023	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code  New York, NY 10023	Amount of Contribution (\$)  \$1.25
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#: _____ ) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code  New York, NY 10023	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 212/262 Rpt: 215/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Alexandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10023	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code  New York, NY 10023	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 213/262 Rpt: 216/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pullman, WA 99163	<b>7</b> Amount of Contribution (\$)  \$2.09
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
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#: _____ ) Still, Francine <hr/> Contributor address; City; State; Zip Code  Marana, AZ 85658	Amount of Contribution (\$)  \$2.00
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#: _____ ) Still, Francine <hr/> Contributor address; City; State; Zip Code  Marana, AZ 85658	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 214/262 Rpt: 217/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Still, Francine	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>6</b> Contributor address; City; State; Zip Code  Marana, AZ 85658		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Still, Francine	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Marana, AZ 85658		
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#: _____ ) Still, Francine	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Marana, AZ 85658		
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#: _____ ) Still, Francine	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Marana, AZ 85658		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sumner, Matthew	Amount of Contribution (\$)  \$1.75
Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 215/262 Rpt: 218/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew	<b>7</b> Amount of Contribution (\$)  \$1.75
<b>6</b> Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Messari
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew	Amount of Contribution (\$)  \$1.75
Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew	Amount of Contribution (\$)  \$1.75
Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew	Amount of Contribution (\$)  \$1.75
Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew	Amount of Contribution (\$)  \$1.75
Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 216/262 Rpt: 219/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>6</b> Contributor address; City; State; Zip Code  Newton, MA 02459		
<b>8</b> Principal occupation / Job title (See Instructions) College Professor		<b>9</b> Employer (See Instructions) Boston College
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Newton, MA 02459		
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Newton, MA 02459		
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Newton, MA 02459		
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Newton, MA 02459		
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Boston College

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 217/262 Rpt: 220/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Eileen	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>6</b> Contributor address; City; State; Zip Code  Newton, MA 02459		
<b>8</b> Principal occupation / Job title (See Instructions) College Professor		<b>9</b> Employer (See Instructions) Boston College
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Kirkland, WA 98034		
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Kirkland, WA 98034		
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Kirkland, WA 98034		
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Kirkland, WA 98034		
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 218/262 Rpt: 221/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kirkland, WA 98034	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Learning Project Manager		<b>9</b> Employer (See Instructions) Boeing
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamble, Adam <hr/> Contributor address; City; State; Zip Code  Kirkland, WA 98034	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Learning Project Manager		Employer (See Instructions) Boeing
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarantina, Mark <hr/> Contributor address; City; State; Zip Code  Ossining, NY 10562	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Morgan Stanley
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 219/262 Rpt: 222/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> <b>6</b> Contributor address; City; State; Zip Code  Berkeley, CA 94707	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Peter <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$5.00
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#: _____ ) Thompson, Susan <hr/> Contributor address; City; State; Zip Code  Fishkill, NY 12524	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 220/262 Rpt: 223/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fishkill, NY 12524	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan <hr/> Contributor address; City; State; Zip Code  Fishkill, NY 12524	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan <hr/> Contributor address; City; State; Zip Code  Fishkill, NY 12524	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan <hr/> Contributor address; City; State; Zip Code  Fishkill, NY 12524	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan <hr/> Contributor address; City; State; Zip Code  Fishkill, NY 12524	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 221/262 Rpt: 224/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Fishkill, NY 12524		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Fishkill, NY 12524		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Fishkill, NY 12524		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Fishkill, NY 12524		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Susan	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Fishkill, NY 12524		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 222/262 Rpt: 225/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>6</b> Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 223/262 Rpt: 226/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tiede, Sara <hr/> <b>6</b> Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 224/262 Rpt: 227/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plymouth, MI 48170	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Ford Motor Company
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tims, Ian <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 07/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 225/262 Rpt: 228/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Tomas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77027		
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#: _____ ) Townsend, Elizabeth	Amount of Contribution (\$) \$1.66
Contributor address; City; State; Zip Code  Reading, MA 01867		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Elizabeth	Amount of Contribution (\$) \$1.66
Contributor address; City; State; Zip Code  Reading, MA 01867		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 226/262 Rpt: 229/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Elizabeth <hr/> <b>6</b> Contributor address; City; State; Zip Code  Reading, MA 01867	<b>7</b> Amount of Contribution (\$)  \$1.66
<b>8</b> Principal occupation / Job title (See Instructions) Scientist		<b>9</b> Employer (See Instructions) Kronos Bio
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code  Reading, MA 01867	Amount of Contribution (\$)  \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code  Reading, MA 01867	Amount of Contribution (\$)  \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code  Reading, MA 01867	Amount of Contribution (\$)  \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trathen, Sally <hr/> Contributor address; City; State; Zip Code  Orangevale, CA 95662	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 227/262 Rpt: 230/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Puppeteer		<b>9</b> Employer (See Instructions) Self
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 228/262 Rpt: 231/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trautman, Allan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Puppeteer		<b>9</b> Employer (See Instructions) Self
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 229/262 Rpt: 232/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	<b>7</b> Amount of Contribution (\$)  \$2.77
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Self
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code  Redwood valley, CA 95470	Amount of Contribution (\$)  \$2.77
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$)  \$3.57
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#: _____ ) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$)  \$3.57
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#: _____ ) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 230/262 Rpt: 233/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tsuneyoshi, Naomi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$)  \$3.57
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#: _____ ) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valenti, Patrick <hr/> Contributor address; City; State; Zip Code  Falls Church, VA 22043	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valenti, Patrick <hr/> Contributor address; City; State; Zip Code  Falls Church, VA 22043	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 231/262 Rpt: 234/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Falls Church, VA 22043		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Marriott
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Falls Church, VA 22043		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Falls Church, VA 22043		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Falls Church, VA 22043		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Marriott
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Addis, LA 70710		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 232/262 Rpt: 235/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veal, Jared	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Addis, LA 70710		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veal, Jared	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Addis, LA 70710		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veal, Jared	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Addis, LA 70710		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veal, Jared	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Addis, LA 70710		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veal, Jared	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Addis, LA 70710		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 233/262 Rpt: 236/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>6</b> Contributor address; City; State; Zip Code  San Diego, TX 92126		
<b>8</b> Principal occupation / Job title (See Instructions) Mechanical Engineer		<b>9</b> Employer (See Instructions) General Atomics
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, TX 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, TX 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, TX 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, TX 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 234/262 Rpt: 237/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Virgen, Matthew <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Diego, TX 92126	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Mechanical Engineer		<b>9</b> Employer (See Instructions) General Atomics
<b>Date</b> 07/01/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WILLIAMS, Wright <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77025	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Clinical Psychologist		<b>Employer (See Instructions)</b> Dept of Veterans Affairs
<b>Date</b> 11/06/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WILLIAMS, Wright <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77025	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Clinical Psychologist		<b>Employer (See Instructions)</b> Dept of Veterans Affairs
<b>Date</b> 07/26/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> <b>Contributor address; City; State; Zip Code</b>  New Orleans, LA 70130	<b>Amount of Contribution (\$)</b>  \$1.25
<b>Principal occupation / Job title (See Instructions)</b> Salesperson		<b>Employer (See Instructions)</b> Levelset
<b>Date</b> 08/26/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> <b>Contributor address; City; State; Zip Code</b>  New Orleans, LA 70130	<b>Amount of Contribution (\$)</b>  \$1.25
<b>Principal occupation / Job title (See Instructions)</b> Salesperson		<b>Employer (See Instructions)</b> Levelset

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 235/262 Rpt: 238/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Orleans, LA 70130	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Salesperson		<b>9</b> Employer (See Instructions) Levelset
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Levelset
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Levelset
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70130	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Levelset
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> Contributor address; City; State; Zip Code  Rochester, MN 55901	Amount of Contribution (\$)  \$2.14
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 236/262 Rpt: 239/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rochester, MN 55901	<b>7</b> Amount of Contribution (\$)  \$2.14
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) The Nature Conservancy
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> Contributor address; City; State; Zip Code  Rochester, MN 55901	Amount of Contribution (\$)  \$2.14
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> Contributor address; City; State; Zip Code  Rochester, MN 55901	Amount of Contribution (\$)  \$2.14
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> Contributor address; City; State; Zip Code  Rochester, MN 55901	Amount of Contribution (\$)  \$2.14
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wales, Marissa <hr/> Contributor address; City; State; Zip Code  Rochester, MN 55901	Amount of Contribution (\$)  \$2.14
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Nature Conservancy

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 237/262 Rpt: 240/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corvallis, OR 97330	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Assistant Director		<b>9</b> Employer (See Instructions) Oregon State University
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> Contributor address; City; State; Zip Code  Corvallis, OR 97330	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> Contributor address; City; State; Zip Code  Corvallis, OR 97330	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> Contributor address; City; State; Zip Code  Corvallis, OR 97330	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> Contributor address; City; State; Zip Code  Corvallis, OR 97330	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Oregon State University



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 238/262 Rpt: 241/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Rylan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corvallis, OR 97330	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Assistant Director		<b>9</b> Employer (See Instructions) Oregon State University
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wallace Bronstein, Dale <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions) First National Wine & Spirits
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code  Greenville, SC 29605	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code  Greenville, SC 29605	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code  Greenville, SC 29605	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 239/262 Rpt: 242/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> <b>6</b> Contributor address; City; State; Zip Code  Greenville, SC 29605	<b>7</b> Amount of Contribution (\$)  \$1.88
<b>8</b> Principal occupation / Job title (See Instructions) Writer		<b>9</b> Employer (See Instructions) Freelance
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code  Greenville, SC 29605	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code  Greenville, SC 29605	Amount of Contribution (\$)  \$1.88
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Freelance
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waugh, Emily <hr/> Contributor address; City; State; Zip Code  Milwaukie, OR 97222	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waugh, Emily <hr/> Contributor address; City; State; Zip Code  Milwaukie, OR 97222	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 240/262 Rpt: 243/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waugh, Emily	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Milwaukie, OR 97222		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waugh, Emily	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Milwaukie, OR 97222		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waugh, Emily	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Milwaukie, OR 97222		
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#: _____ ) Waugh, Emily	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Milwaukie, OR 97222		
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#: _____ ) Werner, Heather	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, CA 92103		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 241/262 Rpt: 244/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Werner, Heather <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Diego, CA 92103	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Werner, Heather <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92103	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Werner, Heather <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92103	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Werner, Heather <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92103	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Werner, Heather <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92103	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 242/262 Rpt: 245/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  AUSTIN, TX 78735		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code  AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 243/262 Rpt: 246/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  AUSTIN, TX 78735	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78735	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code  Mountain View, CA 94043	Amount of Contribution (\$)  \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code  Mountain View, CA 94043	Amount of Contribution (\$)  \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code  Mountain View, CA 94043	Amount of Contribution (\$)  \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 244/262 Rpt: 247/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug	<b>7</b> Amount of Contribution (\$)  \$6.87
	<b>6</b> Contributor address; City; State; Zip Code  Mountain View, CA 94043	
<b>8</b> Principal occupation / Job title (See Instructions) SE		<b>9</b> Employer (See Instructions) Attunity
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug	Amount of Contribution (\$)  \$6.87
	Contributor address; City; State; Zip Code  Mountain View, CA 94043	
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Doug	Amount of Contribution (\$)  \$6.87
	Contributor address; City; State; Zip Code  Mountain View, CA 94043	
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) Attunity
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel	Amount of Contribution (\$)  \$1.43
	Contributor address; City; State; Zip Code  Houston, TX 77025	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel	Amount of Contribution (\$)  \$1.43
	Contributor address; City; State; Zip Code  Houston, TX 77025	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 245/262 Rpt: 248/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Nurse		<b>9</b> Employer (See Instructions) Texas Childrens Hospital
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$1.75
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 246/262 Rpt: 249/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilbur, Jeff <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94602	<b>7</b> Amount of Contribution (\$)  \$1.75
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$1.75
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#: _____ ) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$1.75
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#: _____ ) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$1.75
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#: _____ ) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$1.75
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 247/262 Rpt: 250/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chandler, AZ 85224	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Program Manager		<b>9</b> Employer (See Instructions) Honeywell
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85224	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85224	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85224	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> Contributor address; City; State; Zip Code  Chandler, AZ 85224	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 248/262 Rpt: 251/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chandler, AZ 85224	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Program Manager		<b>9</b> Employer (See Instructions) Honeywell
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Martha <hr/> Contributor address; City; State; Zip Code  Bryan, TX 77802	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) freelance writer		Employer (See Instructions) self
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 249/262 Rpt: 252/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Northampton, MA 01060	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) lawyer		<b>9</b> Employer (See Instructions) ISO New Englad
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code  New York, NY 10027	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 250/262 Rpt: 253/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10027	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code  New York, NY 10027	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code  New York, NY 10027	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code  New York, NY 10027	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code  New York, NY 10027	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Porter Kaye Scholer LLP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 251/262 Rpt: 254/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, TX 94131	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Computer programmer		<b>9</b> Employer (See Instructions) Pixar Animation Studios
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code  San Francisco, TX 94131	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code  San Francisco, TX 94131	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code  San Francisco, TX 94131	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code  San Francisco, TX 94131	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Computer programmer		Employer (See Instructions) Pixar Animation Studios

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 252/262 Rpt: 255/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodbury, Adam <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, TX 94131	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Computer programmer		<b>9</b> Employer (See Instructions) Pixar Animation Studios
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yagerline, John <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22033	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ankura Consulting
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yagerline, John <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22033	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ankura Consulting
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yandell, Bruce <hr/> Contributor address; City; State; Zip Code  Rocklin, CA 95765	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yandell, Bruce <hr/> Contributor address; City; State; Zip Code  Rocklin, CA 95765	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 253/262 Rpt: 256/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Rocklin, CA 95765		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Cubizm
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Rocklin, CA 95765		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Rocklin, CA 95765		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Rocklin, CA 95765		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity	Amount of Contribution (\$)  \$2.86
Contributor address; City; State; Zip Code  San Francisco, CA 94115		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 254/262 Rpt: 257/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yates, Caity <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94115	<b>7</b> Amount of Contribution (\$)  \$2.86
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yates, Caity <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
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#: _____ ) Yates, Caity <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
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#: _____ ) Yates, Caity <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yates, Caity <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 255/262 Rpt: 258/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>6</b> Contributor address; City; State; Zip Code  Lawrence, KS 66049		
<b>8</b> Principal occupation / Job title (See Instructions) Medical Coder		<b>9</b> Employer (See Instructions) Baylor Scott and White
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lawrence, KS 66049		
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lawrence, KS 66049		
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lawrence, KS 66049		
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lawrence, KS 66049		
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 256/262 Rpt: 259/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Kellyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lawrence, KS 66049	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Medical Coder		<b>9</b> Employer (See Instructions) Baylor Scott and White
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zintz, Marji <hr/> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zintz, Marji <hr/> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zintz, Marji <hr/> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	Amount of Contribution (\$)  \$1.25
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#: _____ ) Zintz, Marji <hr/> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 257/262 Rpt: 260/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zintz, Marji <hr/> <b>6</b> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zintz, Marji <hr/> Contributor address; City; State; Zip Code  Olivebridge, NY 12461	Amount of Contribution (\$)  \$1.25
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#: _____ ) Zlotoff, Daniel <hr/> Contributor address; City; State; Zip Code  Fremont, CA 94538	Amount of Contribution (\$)  \$1.14
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Reddit
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zlotoff, Daniel <hr/> Contributor address; City; State; Zip Code  Fremont, CA 94538	Amount of Contribution (\$)  \$1.14
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Reddit
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) arus, pablo <hr/> Contributor address; City; State; Zip Code  Miami Beach, FL 33139	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) assistant property manager		Employer (See Instructions) kw property management

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 258/262 Rpt: 261/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) arus, pablo <hr/> <b>6</b> Contributor address; City; State; Zip Code  Miami Beach, FL 33139	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) assistant property manager		<b>9</b> Employer (See Instructions) kw property management
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) arus, pablo <hr/> Contributor address; City; State; Zip Code  Miami Beach, FL 33139	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) assistant property manager		Employer (See Instructions) kw property management
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code  brooklyn, NY 11238	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code  brooklyn, NY 11238	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code  brooklyn, NY 11238	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 259/262 Rpt: 262/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  brooklyn, NY 11238	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) professor		<b>9</b> Employer (See Instructions) ramapo college
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code  brooklyn, NY 11238	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code  brooklyn, NY 11238	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) ramapo college
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) mueller, joan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) mueller, joan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 260/262 Rpt: 263/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) rittenberry, suzanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  austin, TX 78735	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 261/262 Rpt: 264/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Deloitte
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wachs, miriam <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> Contributor address; City; State; Zip Code  Bremerton, WA 98310	Amount of Contribution (\$)  \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> Contributor address; City; State; Zip Code  Bremerton, WA 98310	Amount of Contribution (\$)  \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> Contributor address; City; State; Zip Code  Bremerton, WA 98310	Amount of Contribution (\$)  \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 262/262 Rpt: 265/291
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bremerton, WA 98310	<b>7</b> Amount of Contribution (\$)  \$6.11
<b>8</b> Principal occupation / Job title (See Instructions) pilot		<b>9</b> Employer (See Instructions) us navy
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> Contributor address; City; State; Zip Code  Bremerton, WA 98310	Amount of Contribution (\$)  \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wild, stephen <hr/> Contributor address; City; State; Zip Code  Bremerton, WA 98310	Amount of Contribution (\$)  \$6.11
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) us navy

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 11/10/2023	<b>5</b> Payee name Acuna, Marco
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<b>6</b> Amount (\$) \$275.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  San Juan, TX
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/10/2023	Payee name Adobe
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Amount (\$) \$35.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/11/2023	Payee name Adobe
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Amount (\$) \$22.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/11/2023	<b>5</b> Payee name Adobe	
<b>6</b> Amount (\$) \$58.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2023	Payee name Adobe	
Amount (\$) \$22.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2023	Payee name Adobe	
Amount (\$) \$22.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/19/2023	<b>5</b> Payee name Adobe	
<b>6</b> Amount (\$) \$20.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 345 Park Avenue  San Jose, TX 95110-2704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2023	Payee name Amazon	
Amount (\$) \$227.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/25/2023	Payee name Amazon	
Amount (\$) \$119.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 08/01/2023	<b>5</b> Payee name Amazon
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<b>6</b> Amount (\$) \$16.23	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2023	Payee name Amazon
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Amount (\$) \$14.06	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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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 09/18/2023	Payee name Amazon
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Amount (\$) \$216.76	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109
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Expenditure from corporate funds

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

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/13/2023	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) \$75.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2023	Payee name Brandboosters	
Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2023	Payee name Brandboosters	
Amount (\$) \$87.04  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Cost
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 09/19/2023	<b>5</b> Payee name Brandboosters
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<b>6</b> Amount (\$) \$336.14  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name Brandboosters
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Amount (\$) \$135.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad expense
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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 12/11/2023	Payee name Brandboosters
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Amount (\$) \$175.41  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/19/2023	<b>5</b> Payee name Brandboosters	
<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Bucees	
Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 327 Hwy 2004 Rd  Lake Jackson, TX 77566	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2023	Payee name Bucees	
Amount (\$) \$53.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 327 Hwy 2004 Rd  Lake Jackson, TX 77566	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 07/11/2023	<b>5</b> Payee name Burger King
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<b>6</b> Amount (\$) \$32.71  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 N Jackson Rd  Pharr, TX 78577
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2023	Payee name Campano, Adriana
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Amount (\$) \$275.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  San Juan Texas, TX
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
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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 08/31/2023	Payee name Ceviche 76
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Amount (\$) \$84.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1715 W Trenton Rd ste 106  Edinburg, TX 78539
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 08/11/2023	<b>5</b> Payee name Chick-Fil-A
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<b>6</b> Amount (\$) \$42.70  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5200 Buffington Road  Atlanta, GA 30349
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2023	Payee name Circle K
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Amount (\$) \$5.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton  Edinburg, TX 78539
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
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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 08/10/2023	Payee name Circle K
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Amount (\$) \$50.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton  Edinburg, TX 78539
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/30/2023	<b>5</b> Payee name Circle K	
<b>6</b> Amount (\$) \$52.28  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2204 W. Trenton  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/18/2023	Payee name Circle K	
Amount (\$) \$40.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton  Edinburg, TX 78539	
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 Travel Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/19/2023	Payee name Circle K	
Amount (\$) \$55.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2204 W. Trenton  Edinburg, TX 78539	
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 Travel Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/13/2023	<b>5</b> Payee name ConstantContact	
<b>6</b> Amount (\$) \$272.06  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Domit Executive Business Center	
Amount (\$) \$400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renr
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name Domit Executive Business Center	
Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 08/08/2023	<b>5</b> Payee name Domit Executive Business Center
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<b>6</b> Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2023	Payee name Domit Executive Business Center
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Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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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 09/18/2023	Payee name Domit Executive Business Center
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Amount (\$) \$115.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/11/2023	<b>5</b> Payee name Domit Executive Business Center	
<b>6</b> Amount (\$) \$850.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name Domit Executive Business Center	
Amount (\$) \$930.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/05/2023	Payee name Domit Executive Business Center	
Amount (\$) \$983.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE  EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 12/11/2023	<b>5</b> Payee name Enterprise
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<b>6</b> Amount (\$) \$372.84  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Hustle
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Amount (\$) \$662.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 595 Market St., Suite 920  San Francisco, TX 94105
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad Expense
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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 09/05/2023	Payee name Le Lai
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Amount (\$) \$33.04  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 07/31/2023	<b>5</b> Payee name Lone Star National Bank
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<b>6</b> Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2023	Payee name Lone Star National Bank
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Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504
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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 Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name Lone Star National Bank
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Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504
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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 Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Lone Star National Bank	
<b>6</b> Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Lone Star National Bank	
Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504	
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 Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Lone Star National Bank	
Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504	
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 Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Lone Star National Bank	
<b>6</b> Amount (\$) \$7.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 600 E Nolana Ave  MCALLEN, TX 78504	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/25/2023	Candidate/Officeholder name Lyft	
Amount (\$) \$35.76  <input type="checkbox"/> Expenditure from corporate funds	Office sought 185 Berry St Suite 400  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/13/2023	Candidate/Officeholder name Mega.NZ	
Amount (\$) \$0.17  <input type="checkbox"/> Expenditure from corporate funds	Office sought Spring Hill Farm 1232 Sh1 Rd2  Wellsford Auckland 0972 New Zealand	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/13/2023	<b>5</b> Payee name Mega.NZ	
<b>6</b> Amount (\$) \$5.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2  Wellsford Auckland 0972 New Zealand	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Mega.NZ	
Amount (\$) \$0.16  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2  Wellsford Auckland 0972 New Zealand	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Mega.NZ	
Amount (\$) \$5.49  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Spring Hill Farm 1232 Sh1 Rd2  Wellsford Auckland 0972 New Zealand	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/09/2023	<b>5</b> Payee name Public Research Group	
<b>6</b> Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 135 Paseo Del Prado  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2023	Payee name Spectrum	
Amount (\$) \$154.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Atlantic Street  Stamford, CT 06901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Spectrum	
Amount (\$) \$78.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Atlantic Street  Stamford, CT 06901	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/10/2023	<b>5</b> Payee name Spectrum	
<b>6</b> Amount (\$) \$165.73  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Atlantic Street  Stamford, CT 06901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Starbucks	
Amount (\$) \$25.49  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2023	Payee name Starbucks	
Amount (\$) \$9.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 07/31/2023	<b>5</b> Payee name Starbucks	
<b>6</b> Amount (\$) \$33.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/13/2023	Payee name Stripes	
Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4218 S. McColl  McAllen, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/21/2023	Payee name Stripes	
Amount (\$) \$45.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4218 S. McColl  McAllen, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/02/2023	<b>5</b> Payee name Stripes	
<b>6</b> Amount (\$) \$78.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/09/2023	Payee name Stripes	
Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/09/2023	Payee name Stripes	
Amount (\$) \$45.46  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/10/2023	<b>5</b> Payee name Stripes	
<b>6</b> Amount (\$) \$42.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Stripes	
Amount (\$) \$5.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2023	Payee name United Airlines	
Amount (\$) \$374.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 233 S. Wacker Drive  Chicago, IL 60606	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/13/2023	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) \$336.17  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 233 S. Wacker Drive  Chicago, IL 60606	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2023	Payee name Wal Mart	
Amount (\$) \$35.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name Wal Mart	
Amount (\$) \$16.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 08/09/2023	<b>5</b> Payee name Wal Mart	
<b>6</b> Amount (\$) \$148.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Wal Mart	
Amount (\$) \$71.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2023	Payee name Wal Mart	
Amount (\$) \$37.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/26 Rpt:	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 09/18/2023	<b>5</b> Payee name Wal Mart
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<b>6</b> Amount (\$) \$80.69	<b>7</b> Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Wal Mart
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Amount (\$) \$142.74	Payee address; City; State; Zip Code 1421 W Frontage Rd  Alamo, TX 78516
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name Wix.Com
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Amount (\$) \$217.36	Payee address; City; State; Zip Code 2601 Mission Street  San Francisco, CA 94110
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Expenditure from corporate funds

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