FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086854 3 COMMITTEE NAME **OFFICE USE ONLY Texas Progressive Caucus** Date Received **ELECTRONICALLY FILED** 01/10/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 59 Date Hand-delivered or Date Postmarked Change of Address Lampasas, TX 76550 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Kristi NAME NICKNAME LAST **SUFFIX** Lara STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6600 Preston Rd STREET **ADDRESS** #2023 (Residence or Business) Plano, TX 75024 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 59 MAILING **ADDRESS** Lampasas, TX 76550 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-1808 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)			
Texas Progressive Cau	cus		00086854		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,538.50	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,363.35	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	22,297.75	
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT	<u>'</u>		·		
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.			
		Krist	ti Lara		
		Signature of Ca	mpaign Treasu	irer	
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said	, ti	his the	day	
		which, witness my hand and seal of office.			
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	cer administering oath	

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

		•	OVER ONEE	3 of 63				
17 COMMITT		18 Filer ID	(Ethics Commission	n Filers)				
	ogressive Caucus	00086854	1					
	E SUBTOTALS SCHEDULE		SUBTOTAL A	MOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	10,038.50				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION							
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$					
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$					
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$					
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$					
9.	SCHEDULE E: LOANS		\$					
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,363.35				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONEI	IETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orn	1.	1	Total pages Schedule A1: Sch: 1/29 Rpt: 4/63			
2	FILER NAME	essive Caucus				3	Filer ID (Ethics Commission 00086854	on Filers)		
_						Ļ				
4	Date 07/29/2023	5 Full name of contributor Ardiente, Nicolette6 Contributor address; City; S	out-of-state PAC (ID#:_			<i>'</i>	Amount of Contribution (\$)	\$60.00		
		San Antonio, TX 78256								
8		pation / Job title (See Instructions	5)		Employer (See Instructions					
	Community I	Engagement Manager			Asian Texans for Justice					
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00				
		Houston, TX 77006								
	Principal occu Retired	pation / Job title (See Instructions	s) 		Employer (See Instructions Retired	()				
	Date	Full name of contributor	out-of-state PAC (ID#:_	<u> </u>)		Amount of Contribution (\$)			
	08/25/2023	Baird, LeAnne	out or state 1710 (ibii		/		7 and and an earland all and (4)	\$30.00		
		Contributor address; City; S Dallas, TX 75248	tate; Zip Code							
	Dringing aggu		,, <u> </u>	_	Employer (See Instructions	·/				
	Not Employe	pation / Job title (See Instructions	b)		Employer (See Instructions Not Employed)				
	Not Employe				Not Employed					
Date Full name of contributor out-of-state PA 12/12/2023 Baird, LeAnne Contributor address; City; State; Zip Code Dallas, TX 75248		out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$10.00			
	Principal occu	pation / Job title (See Instructions	3)		Employer (See Instructions)				
	Tutor				Kumon Prestonwood					
	Date	Full name of contributor	out-of-state PAC (ID#:_	<u> </u>			Amount of Contribution (\$)			
	10/31/2023	Barugh, Tami						\$30.00		
		Contributor address; City; S Grapeland, TX 75844	tate; Zip Code							
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Retired)				
				<u> </u>						

	MONET	ARY POLITICAL CONT	SCHEDULE A1				
	The Instruc	ction Guide explains how to co	mplete this forr	m.	1	Total pages Schedule A1: Sch: 2/29 Rpt: 5/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 12/09/2023	 5 Full name of contributor out-out-out-out-out-out-out-out-out-out-			7	Amount of Contribution (\$)	\$10.00
_	Dringing! aggs	Dallas, TX 75230	lo.	Employer (See Instructions	<u></u>		
8		pation / Job title (See Instructions) apist and Social Worker	9	Employer (See Instructions Pending	5)		
	Date 12/09/2023	Burns, Macey Contributor address; City; State; Zip				Amount of Contribution (\$)	\$60.00
	Principal occu	Allen, TX 75002 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Hair Stylist	•		Self-Employed			
	Date 12/09/2023	Full name of contributor out- Clark, Nathan Contributor address; City; State; Zip	of-state PAC (ID#: Code)		Amount of Contribution (\$)	\$2.50
		Rockwall, TX 75087					
	Principal occu Surveyor	pation / Job title (See Instructions)		Employer (See Instructions Ltra	5)		
Date 07/22/2023		Full name of contributor out-of-state PAC (ID#:) Clem, Ted Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$10.00	
	Principal occu Physicist	pation / Job title (See Instructions)		Employer (See Instructions EPS Corp	<u>(</u>		
	Date 08/22/2023	Clem, Ted	of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Physicist	pation / Job title (See Instructions)		Employer (See Instructions EPS Corp	5)		
			•				

	MONET	ARY POLITICAL CONTRI	SCHEDULE A1				
	The Instruc	ction Guide explains how to compl	ete this form	m.	1	Total pages Schedule A1: Sch: 3/29 Rpt: 6/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 09/22/2023	 5 Full name of contributor out-of-star Out-of-)	7	Amount of Contribution (\$)	\$10.00
_	Delicational	Austin, TX 78701	la la	Farada and (October American			
8	Principal occu Physicist	pation / Job title (See Instructions)	9	Employer (See Instructions EPS Corp	5)		
	Date 10/22/2023	Clem, Ted Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Physicist			EPS Corp			
	Date 11/22/2023	Full name of contributor out-of-state Clem, Ted Contributor address; City; State; Zip Code	te PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
		Austin, TX 78701					
	Principal occu Physicist	pation / Job title (See Instructions)		Employer (See Instructions EPS Corp	5)		
Date 12/22/2023		Clem, Ted)		Amount of Contribution (\$)	\$10.00
	Principal occu Physicist	pation / Job title (See Instructions)		Employer (See Instructions EPS Corp	<u>(</u>		
	Date 07/09/2023	Full name of contributor out-of-state Contreras, Trish Contributor address; City; State; Zip Code Seguin, TX 78715	te PAC (ID#:			Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions) Events Coordinator		Employer (See Instructions KOOP Radio 91.7 FM	5)		
	volunteer &	Lverits Coordinator		NOOT NAME OF THE PROPERTY OF T			

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 4/29 Rpt: 7/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	n Filers)
4	Date 12/09/2023	 5 Full name of contributor out-of-state PAC (IE Contreras, Trish 6 Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$20.00
0	Dringing agg	Seguin, TX 78715	ام	Employer (See Instruction	<u></u>		
•		pation / Job title (See Instructions) Events Coordinator	g	Employer (See Instructions KOOP Radio 91.7 FM	s) 		
	Date 12/09/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$60.00
	Principal occu	Parker, TX 75002 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Software sup	pport		unemployed			
	Date 09/03/2023	Full name of contributor out-of-state PAC (IED ungan, Brian Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$)	\$30.00
		Carrollton, TX 75010					
	Principal occu Tutor	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
	Date 12/28/2023	Full name of contributor out-of-state PAC (IE Fant-Simon, Gina Contributor address; City; State; Zip Code Dripping Springs, TX 78620)		Amount of Contribution (\$)	\$120.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/31/2023	Full name of contributor out-of-state PAC (IE Fisher, David Contributor address; City; State; Zip Code Dallas, TX 75209				Amount of Contribution (\$)	\$30.00
	Principal occu Field Repres	pation / Job title (See Instructions)		Employer (See Instructions U. S. Census Bureau	s)		
	Tielu Kepies	- Tally C		O. O. Census Duredu			

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/29 Rpt: 8/63	
2	FILER NAME Texas Progr	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 12/12/2023	5 Full name of contributorFisher, David6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$60.00
L		Dallas, TX 75209	<u> </u>				
8	Field Repres			Employer (See Instructions U. S. Census Bureau	i)		
	Date 09/02/2023	Full name of contributor Fladmark, Michael Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Dringing age	Tool, TX 75143		Employer (See Instructions	_		
	Solar Design	pation / Job title (See Instructions n Consultant		Employer (See Instructions Self)		
	Date 10/02/2023	Full name of contributor Fladmark, Michael Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Tool, TX 75143					
	Principal occu Solar Design	pation / Job title (See Instructions n Consultant		Employer (See Instructions Self	i)		
			out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Solar Desigr	Tool, TX 75143 Ipation / Job title (See Instructions In Consultant)	Employer (See Instructions Self	<u> </u>		
	Date 12/02/2023	Full name of contributor Fladmark, Michael Contributor address; City; St. Tool, TX 75143	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu Solar Design	pation / Job title (See Instructions Consultant		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete t	this for	n.	1	Total pages Schedule A1: Sch: 6/29 Rpt: 9/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 08/28/2023	 Full name of contributor out-of-state PAC Fletcher, Jan Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$30.00
_	Deinsinal assu	Sherman, TX 75092	10	Franksian (Cook Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Not Employed	5)		
	Date 07/11/2023	Full name of contributor out-of-state PAC Fuller, Jeanne Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78248			Ĺ		
	web-building	pation / Job title (See Instructions) , marketing		Employer (See Instructions Self	S)		
	Date 07/16/2023	Full name of contributor out-of-state PAC Fuller, Jeanne Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78248					
	Principal occu web-building	pation / Job title (See Instructions) , marketing		Employer (See Instructions Self	5)		
08/11/2023 Fu Co		Full name of contributor out-of-state PAG Fuller, Jeanne Contributor address; City; State; Zip Code San Antonio, TX 78248		<u>; </u>		Amount of Contribution (\$)	\$10.00
	Principal occu web-building	pation / Job title (See Instructions) , marketing		Employer (See Instructions Self	5)		
	Date 09/16/2023	Full name of contributor out-of-state PAC Fuller, Jeanne Contributor address; City; State; Zip Code San Antonio, TX 78248)	•	Amount of Contribution (\$)	\$10.00
	Principal occu web-building	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	web-bullullig	, mancung		- Coll			

	MONEI	ETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 7/29 Rpt: 10/63		
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	ı Filers)	
4	Date 10/16/2023	5 Full name of contributorFuller, Jeanne6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00	
8	Principal occu web-building	San Antonio, TX 78248 pation / Job title (See Instructions , marketing)		Employer (See Instructions Self	<u> </u> s)			
	Date 11/16/2023	Full name of contributor Fuller, Jeanne Contributor address; City; St San Antonio, TX 78248	out-of-state PAC (ID#:ate; Zip Code				Amount of Contribution (\$)	\$10.00	
	Principal occu web-building	I pation / Job title (See Instructions)		Employer (See Instructions Self	<u> </u>			
	Date 12/16/2023	Full name of contributor Fuller, Jeanne Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00	
	Principal occu	San Antonio, TX 78248 pation / Job title (See Instructions)		Employer (See Instructions	 s)			
	web-building	, marketing			Self				
Date 09/02/2023		Full name of contributor Gonzales, Lizette Contributor address; City; St Kingsville, TX 78363	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$30.00	
	Principal occu Research Lia	pation / Job title (See Instructions aison Officer)		Employer (See Instructions The University of Texas		o Grande Valley		
	Date 10/02/2023	Full name of contributor Gonzales, Lizette Contributor address; City; St Kingsville, TX 78363	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$30.00	
	Principal occu Research Lia	pation / Job title (See Instructions aison Officer)		Employer (See Instructions The University of Texas		o Grande Valley		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 8/29 Rpt: 11/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 11/02/2023	 Full name of contributor out-of Gonzales, Lizette Contributor address; City; State; Zip C)	7	Amount of Contribution (\$)	\$30.00
_	Dringing! aggr	Kingsville, TX 78363	lo.	Employer (See Instructions			
0	Research Lia	pation / Job title (See Instructions) aison Officer	9	Employer (See Instructions The University of Texas		o Grande Valley	
	Date 07/26/2023	Grubb, Greg Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$30.00
	Principal occu	Tyler, TX 75701 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Retired			Retired	,		
	Date 08/26/2023	Full name of contributor out-of Grubb, Greg Contributor address; City; State; Zip C	f-state PAC (ID#: Code)		Amount of Contribution (\$)	\$30.00
		Tyler, TX 75701					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
Date 09/26/2023		Grubb, Greg	-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u>		
	Date 10/26/2023	Grubb, Greg	f-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()		

	MONET	ARY POLITICAL CONT		SCHEDULE A1			
	The Instruc	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 9/29 Rpt: 12/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	n Filers)
4	Date 11/26/2023	Grubb, Greg	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$30.00
_	5	Tyler, TX 75701			_		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/26/2023 Grubb, Greg Contributor address; City; State; Zip Code Tyler, TX 75701			Amount of Contribution (\$)	\$30.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)		
	Date 09/14/2023	Hall, John Contributor address; City; State; Zip	of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Austin, TX 78750 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	10/14/2023 Hall, John		of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	Austin, TX 78750 pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)		
	Date 08/29/2023	Helfand, Marcy	of-state PAC (ID#:)		Amount of Contribution (\$)	\$60.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Marcy C. Helfand, P.C.	5)		
			l				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/29 Rpt: 13/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 10/18/2023	5 Full name of contributor Hernandez, Cassandra6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$30.00
		Farmers Branch, TX 7524					
8	Principal occu Attorney	pation / Job title (See Instructions))	9 Employer (See Instructions Hernandez Law Group	s) 		
	Date 12/03/2023	Full name of contributor Kendelbacher, Thomas Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code		•	Amount of Contribution (\$)	\$30.00
	Principal occu	Seabrook, TX 77586 spation / Job title (See Instructions))	Employer (See Instructions	e) 		
			Airbus DS Space Syste		Inc.		
	Date 07/24/2023	Full name of contributor LoweSolis, Michelle Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78209					
	Principal occu Not Employe	pation / Job title (See Instructions) ed)	Employer (See Instructions Not Employed	s)		
			out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	I pation / Job title (See Instructions))	Employer (See Instructions Not Employed	<u>I</u> S)		
	Date 09/24/2023	Full name of contributor LoweSolis, Michelle Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed)	Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 11/29 Rpt: 14/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 10/24/2023	 Full name of contributor out-of-state PAC (LoweSolis, Michelle Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	San Antonio, TX 78209 pation / Job title (See Instructions)	la la	Employer (See Instructions	;) 		
Ü	Not Employe			Not Employed	"		
	Date 11/24/2023	Full name of contributor out-of-state PAC (LoweSolis, Michelle Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78209			Ĺ		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	S)		
	Date 12/24/2023	Full name of contributor out-of-state PAC (LoweSolis, Michelle Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78209					
	Principal occup	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 09/02/2023	Full name of contributor out-of-state PAC (Lugo, Judy Contributor address; City; State; Zip Code El Paso, TX 79930)		Amount of Contribution (\$)	\$10.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>s)</u>		
	Date 10/02/2023	Full name of contributor out-of-state PAC (Lugo, Judy Contributor address; City; State; Zip Code El Paso, TX 79930)		Amount of Contribution (\$)	\$10.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
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	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 12/29 Rpt: 15/63	
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 11/02/2023	5 Full name of contributor Lugo, Judy6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00
_	Dringing Loon	El Paso, TX 79930	A)	_	Employer (Coo Instructions	<u></u>		
8	Retired	pation / Job title (See Instruction	5)	9	Employer (See Instructions Retired	5)		
	Date 12/02/2023	Full name of contributor Lugo, Judy Contributor address; City; S)		Amount of Contribution (\$)	\$10.00
	Principal occu	El Paso, TX 79930 pation / Job title (See Instruction	2)		Employer (See Instructions	;) 		
	Retired	pation / 300 title (See instruction	5)		Retired	·)		
	Date 08/22/2023	Full name of contributor MacDougal, Vanessa Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	•	Amount of Contribution (\$)	\$10.00
		Austin, TX 78757						
	Principal occu software eng	pation / Job title (See Instruction gineer	5)		Employer (See Instructions Rapid7	5)		
	Date 09/22/2023	Full name of contributor MacDougal, Vanessa Contributor address; City; S Austin, TX 78757)	•	Amount of Contribution (\$)	\$10.00
	Principal occu software eng	pation / Job title (See Instruction	5)		Employer (See Instructions Rapid7	<u>I</u> S)		
	Date 10/22/2023	Full name of contributor MacDougal, Vanessa Contributor address; City; S Austin, TX 78757	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$10.00
	Principal occu software eng	pation / Job title (See Instruction	5)		Employer (See Instructions Rapid7	5)		
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	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 13/29 Rpt: 16/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 11/22/2023	5 Full name of contributor MacDougal, Vanessa6 Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$10.00
	Dringing Loon	Austin, TX 78757	lo.	Employer (Coo Instruction	<u></u>		
8	software eng	pation / Job title (See Instructions) iineer	9	Employer (See Instructions Rapid7	5)		
	Date 12/22/2023	Full name of contributor MacDougal, Vanessa Contributor address; City; Sta	out-of-state PAC (ID#:atte; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	software eng	ineer		Rapid7			
	Date 09/12/2023	Full name of contributor Montalvo, David Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)	-	Amount of Contribution (\$)	\$30.00
		Tyler, TX 75703					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 09/02/2023	Full name of contributor Mulligan, Brody Contributor address; City; Sta				Amount of Contribution (\$)	\$10.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 10/05/2023	Full name of contributor Mulligan, Brody Contributor address; City; Sta)		Amount of Contribution (\$)	\$10.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 14/29 Rpt: 17/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	n Filers)
4	Date 12/09/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$10.00
_	Deinsinal	Austin, TX 78739	<u> </u>	Faralassa (Ossalastasstissa			
8	kwik mart	pation / Job title (See Instructions)	9	Employer (See Instructions self employed			
	Date 07/27/2023	Full name of contributor out-of-state PAC (IE Phillips, Stephanie Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	San Marcos, TX 78666 pation / Job title (See Instructions)	_	Employer (See Instructions	<u>;)</u>		
	Educator	pation 7 oob title (occ mondellons)		Self	"		
	Date 08/27/2023	Full name of contributor out-of-state PAC (IE Phillips, Stephanie Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$10.00
		San Marcos, TX 78666					
	Principal occu Educator	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
	Date 07/03/2023	Full name of contributor out-of-state PAC (IE Porter, Rachel Contributor address; City; State; Zip Code San Antonio, TX 78213)		Amount of Contribution (\$)	\$1.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (IE Porter, Rachel Contributor address; City; State; Zip Code San Antonio, TX 78213			•	Amount of Contribution (\$)	\$1.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 15/29 Rpt: 18/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 09/03/2023	 Full name of contributor out-of-state PAGE out-of-state)	7	Amount of Contribution (\$)	\$1.00
_	Dringing aggr	San Antonio, TX 78213		Employer (Co.) Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
	Date 10/03/2023	Full name of contributor out-of-state PAG Porter, Rachel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1.00
	Principal occur	San Antonio, TX 78213 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Not Employe			Not Employed	·)		
	Date 11/03/2023	Full name of contributor	.C (ID#:)	•	Amount of Contribution (\$)	\$1.00
		San Antonio, TX 78213					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 12/03/2023	Full name of contributor out-of-state PAG Porter, Rachel Contributor address; City; State; Zip Code San Antonio, TX 78213)	•	Amount of Contribution (\$)	\$1.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 12/09/2023	Full name of contributor out-of-state PAG Prilliman, Angela Contributor address; City; State; Zip Code Fort Worth, TX 76107)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Entrepreneu	pation / Job title (See Instructions)		Employer (See Instructions Self employed	s)		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/29 Rpt: 19/63	
2	FILER NAME	againa Canana			3	•	n Filers)
_		essive Caucus			Ļ	00086854	
4	Date 12/28/2023	5 Full name of contributor Reynolds, Ron6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
		Missouri City, TX 77489					
8		pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	State Repres	sentative		Civitas			
	Date 08/24/2023	Full name of contributor Richardson, Corrine Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$5.00
		Cedar Park, TX 78613					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions			
	Congression	al aid		U.S. House of Represe	ntai	ives	
	Date 09/24/2023	Full name of contributor Richardson, Corrine Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Cedar Park, TX 78613					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
	Congression	al aid		U.S. House of Represe	nta	ives	
	Date 10/24/2023	Full name of contributor Richardson, Corrine Contributor address; City; Si Cedar Park, TX 78613	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Congression	al aid		U.S. House of Represe	ntai	ives	
	Date 11/24/2023	Full name of contributor Richardson, Corrine Contributor address; City; Si Cedar Park, TX 78613	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Congression	al aid		U.S. House of Represe	ntai	ives	
			<u>'</u>				

	MONEI	ARY POLITICAL CONT	RIBUTIONS		SCHEDULE	A1
	The Instru	ction Guide explains how to com	plete this form.	I	Total pages Schedule A1: Sch: 17/29 Rpt: 20/63	
2	FILER NAME Texas Progre	essive Caucus			Filer ID (Ethics Commission I 00086854	Filers)
4	Date 12/24/2023	 Full name of contributor out-of- Richardson, Corrine Contributor address; City; State; Zip C 	state PAC (ID#:	7	Amount of Contribution (\$)	\$5.00
Ω	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions)	9 Employer (S	See Instructions)		
0	Congression			e of Representati	ves	
	Date 09/02/2023	Robinson, Kimmy Contributor address; City; State; Zip C	state PAC (ID#:		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (S	See Instructions)		
	Paralegal	padon, cos dao (cos monacione)			elman & Dicker, LLP	
	Date 10/02/2023	Full name of contributor out-of-Robinson, Kimmy Contributor address; City; State; Zip C	state PAC (ID#: ode		Amount of Contribution (\$)	\$5.00
		Farmers Branch, TX 75234	<u> </u>			
	Principal occu Paralegal	pation / Job title (See Instructions)		See Instructions) er Moskowitz Ede	elman & Dicker, LLP	
	Date 11/02/2023	Full name of contributor out-of- Robinson, Kimmy Contributor address; City; State; Zip C Farmers Branch, TX 75234	state PAC (ID#:		Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal	pation / Job title (See Instructions)		See Instructions) er Moskowitz Ede	elman & Dicker, LLP	
	Date 12/02/2023	Full name of contributor out-of-Robinson, Kimmy Contributor address; City; State; Zip C	otate PAC (ID#:		Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal	pation / Job title (See Instructions)		See Instructions) er Moskowitz Ede	elman & Dicker, LLP	
			·			

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 18/29 Rpt: 21/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	n Filers)
4	Date 09/13/2023	5 Full name of contributor Rusk, Mitzi6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$150.00
8		Tyler, TX 75711 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
	Date 12/31/2023	Full name of contributor Rusk, Mitzi Contributor address; City; Sta		Not Employed		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/02/2023	Full name of contributor Salem, M. Emad Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Dringinal accur	Euless, TX 76040 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Realtor	pation / 305 title (300 manuchors)		Sellstate Metro Realty	•		
	Date 12/09/2023	Full name of contributor Salter, Carolyn Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$120.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
	Date 07/03/2023	Full name of contributor Sanders, Katherine Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			<u>, </u>				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 19/29 Rpt: 22/63	
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 08/03/2023	5 Full name of contributor Sanders, Katherine6 Contributor address; City; St	out-of-state PAC (ID#: iate; Zip Code			7	Amount of Contribution (\$)	\$30.00
_	Dringing! aggs	Cleburne, TX 76033	Ic	_	Employer (Con Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions d	,		Employer (See Instructions Not Employed	>)		
	Date 09/03/2023	Full name of contributor Sanders, Katherine Contributor address; City; Si)	•	Amount of Contribution (\$)	\$30.00
		Cleburne, TX 76033						
	Principal occup Not Employe	pation / Job title (See Instructions d	(i)		Employer (See Instructions Not Employed	s)		
	Date 10/03/2023	Full name of contributor Sanders, Katherine Contributor address; City; Si	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$30.00
	5	Cleburne, TX 76033	, 1			<u></u>		
	Not Employe	pation / Job title (See Instructions d	5)		Employer (See Instructions Not Employed	5)		
	Date 11/03/2023	Full name of contributor Sanders, Katherine Contributor address; City; Si Cleburne, TX 76033	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	Principal occu Not Employe	pation / Job title (See Instructions d	(5)		Employer (See Instructions Not Employed	5)		
	Date 12/03/2023	Full name of contributor Sanders, Katherine Contributor address; City; Si Cleburne, TX 76033	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	Principal occu Not Employe	pation / Job title (See Instructions	(s)		Employer (See Instructions Not Employed	5)		
			-					

	MONET	ARY POLITICAL	CONTRIBUTIO	N	IS		SCHEDUI	LE A1
	The Instruc	ction Guide explains ho	w to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 20/29 Rpt: 23/63	
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	on Filers)
4	Date 09/02/2023	5 Full name of contributor Schoonover, Carla6 Contributor address; City; S	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$30.00
_		Palo Pinto, TX 76484		_	5 1 (0 1 1 1	<u></u>		
8	Principal occu Professional	pation / Job title (See Instruction	S)	9	Employer (See Instructions TMI	5)		
	Date 10/02/2023	Full name of contributor Schoonover, Carla Contributor address; City; S)		Amount of Contribution (\$)	\$30.00
	Dringing! aggr	Palo Pinto, TX 76484	۵)	ı —	Employer (Cool potructions	<u></u>		
	Professional	pation / Job title (See Instruction	5)		Employer (See Instructions TMI	s)		
	Date 11/02/2023	Full name of contributor Schoonover, Carla Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$30.00
		Palo Pinto, TX 76484						
	Principal occu Professional	pation / Job title (See Instruction	s)		Employer (See Instructions TMI	s)		
	Date 12/02/2023	Full name of contributor Schoonover, Carla Contributor address; City; S Palo Pinto, TX 76484				•	Amount of Contribution (\$)	\$30.00
	Principal occu Professional	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	Date 07/11/2023	Full name of contributor Shamsi, Farrukh Contributor address; City; S Houston, TX 77024	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instruction	s)		Employer (See Instructions Texas Clinic	s)		

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this for	m.	1	Total pages Schedule A1: Sch: 21/29 Rpt: 24/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	on Filers)
4	Date 08/11/2023	5 Full name of contributor Shamsi, Farrukh6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu President	Houston, TX 77024 pation / Job title (See Instructions	s) 9	Employer (See Instructions Texas Clinic	5)		
	Date 09/11/2023	Full name of contributor Shamsi, Farrukh Contributor address; City; S Houston, TX 77024	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Texas Clinic	5)		
	Date 10/11/2023	Full name of contributor Shamsi, Farrukh Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	Houston, TX 77024 pation / Job title (See Instructions	5)	Employer (See Instructions Texas Clinic	5)		
_	Date 11/11/2023	Full name of contributor Shamsi, Farrukh Contributor address; City; S Houston, TX 77024	out-of-state PAC (ID#:tate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Texas Clinic	i)		
	Date 12/11/2023	Full name of contributor Shamsi, Farrukh Contributor address; City; S Houston, TX 77024	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Texas Clinic	()		
			•				

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 22/29 Rpt: 25/63	
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 12/19/2023	5 Full name of contributor Sheaks, Robert6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
		Irving, TX 75060						
8	Principal occu Lab tech	pation / Job title (See Instructions	s) <u> </u>	9	Employer (See Instructions Electro Plate Circuitry	5)		
	Date 07/19/2023	Full name of contributor Siddiqui, Aftab Contributor address; City; S)		Amount of Contribution (\$)	\$10.00
	Principal occu	Arlington, TX 76002 pation / Job title (See Instructions	9		Employer (See Instructions	<u>:)</u>		
	Not Employe		,		Not Employed	·)		
	Date 08/19/2023	Full name of contributor Siddiqui, Aftab Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00
		Arlington, TX 76002						
	Principal occu Not Employe	pation / Job title (See Instructions	s)		Employer (See Instructions Not Employed	5)		
	Date 09/19/2023	Full name of contributor Siddiqui, Aftab Contributor address; City; S Arlington, TX 76002	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions Not Employed	5)		
	Date 10/19/2023	Full name of contributor Siddiqui, Aftab Contributor address; City; S Arlington, TX 76002	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructionsed	(3)		Employer (See Instructions Not Employed	s)		
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	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 23/29 Rpt: 26/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	ı Filers)
4	Date 11/19/2023	 Full name of contributor out-of-state PAC (Siddiqui, Aftab Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Arlington, TX 76002 pation / Job title (See Instructions)	l _a	Employer (See Instructions	·/		
0	Not Employe			Not Employed	·)		
	Date 12/19/2023	Full name of contributor out-of-state PAC (Siddiqui, Aftab Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$10.00
		Arlington, TX 76002					
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 12/09/2023	Full name of contributor out-of-state PAC (Sutka, Jeremy Contributor address; City; State; Zip Code	(ID#:		•	Amount of Contribution (\$)	\$5.00
		McKinney, TX 75070					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions KJMB Solutions, Inc.	5)		
	Date 09/02/2023	Full name of contributor out-of-state PAC (Thornton, Edward Contributor address; City; State; Zip Code Houston, TX 77057)		Amount of Contribution (\$)	\$5.00
	Principal occu Sound Desig	pation / Job title (See Instructions)		Employer (See Instructions Self	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/02/2023 Thornton, Edward Contributor address; City; State; Zip Code Houston, TX 77057		•	Amount of Contribution (\$)	\$5.00		
	Principal occu Sound Desig	pation / Job title (See Instructions) Iner		Employer (See Instructions Self	s)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 24/29 Rpt: 27/63	
2	FILER NAME Texas Progre	essive Caucus				3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 11/02/2023	5 Full name of contributor Thornton, Edward6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Houston, TX 77057 pation / Job title (See Instructions	1	۵	Employer (See Instructions	-, 		
0	Sound Desig)	9	Self	·)		
	Date 12/02/2023	Full name of contributor Thornton, Edward Contributor address; City; St)	•	Amount of Contribution (\$)	\$5.00
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Sound Desig		,		Self	,		
	Date 12/31/2023	Full name of contributor Tucker, Terry Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$65.00
		Lampasas, TX 76550						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 11/01/2023	Full name of contributor Vernon, Frances Contributor address; City; St Wichita Falls, TX 76308	out-of-state PAC (ID#:_ ate; Zip Code)	-	Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructionsed)		Employer (See Instructions Not Employed	5)		
	Date 12/02/2023	Full name of contributor Vernon, Frances Contributor address; City; St Wichita Falls, TX 76308	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULE	A1
	The Instruc	ction Guide explains how t	to complete this form	n.	1	Total pages Schedule A1: Sch: 25/29 Rpt: 28/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 08/22/2023	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Houston, TX 77092 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 		
Ŭ	Program Ass			Concordis	"		
	Date 08/31/2023	Full name of contributor Voraman, Albert Contributor address; City; Stat Houston, TX 77092	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Program Ass	sistant		Concordis			
	Date 09/15/2023	Full name of contributor Voraman, Albert Contributor address; City; Stat	out-of-state PAC (ID#: ee; Zip Code)	•	Amount of Contribution (\$)	\$5.00
		Houston, TX 77092					
	Principal occu Program Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions Concordis	5)		
	Date 09/22/2023	Full name of contributor Voraman, Albert Contributor address; City; Stat Houston, TX 77092	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Program Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions Concordis	5)		
	Date 10/01/2023	Full name of contributor Voraman, Albert Contributor address; City; Stat Houston, TX 77092	out-of-state PAC (ID#: e; Zip Code)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Program Ass	pation / Job title (See Instructions)		Employer (See Instructions Concordis	5)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A				
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 26/29 Rpt: 29/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date 10/15/2023	5 Full name of contributor [Voraman, Albert6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Houston, TX 77092 pation / Job title (See Instructions)	او	Employer (See Instructions	;) 		
•	Program Ass			Concordis	"		
	Date 10/22/2023	Full name of contributor Voraman, Albert Contributor address; City; Sta Houston, TX 77092)	•	Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Program Ass	sistant		Concordis			
	Date 11/01/2023	Full name of contributor Voraman, Albert Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$5.00
		Houston, TX 77092					
	Principal occu Program Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions Concordis	5)		
	Date 11/15/2023	Full name of contributor Voraman, Albert Contributor address; City; Sta Houston, TX 77092	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu Program Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions Concordis	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/22/2023 Voraman, Albert Contributor address; City; State; Zip Code Houston, TX 77092		•	Amount of Contribution (\$)	\$5.00		
	Principal occu Program Ass	pation / Job title (See Instructions)		Employer (See Instructions Concordis	5)		
	<u> </u>			-			

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 27/29 Rpt: 30/63	
2	FILER NAME Texas Progre	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4			7	Amount of Contribution (\$)	\$5.00		
8	Principal occu Program Ass	Houston, TX 77092 pation / Job title (See Instructions) sistant	9	Employer (See Instructions Concordis	5)		
	Date 12/15/2023	Full name of contributor Voraman, Albert Contributor address; City; Sta Houston, TX 77092	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu Program Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions Concordis	s)		
	Date 12/22/2023	Full name of contributor Voraman, Albert Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Houston, TX 77092 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Program Ass	sistant		Concordis			
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2023 Washburn, Ty Contributor address; City; State; Zip Code Weatherford, TX 76086			Amount of Contribution (\$)	\$5.00		
	Principal occu IT Analyst	pation / Job title (See Instructions)		Employer (See Instructions HF Sinclair	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/28/2023 Wedig, Lynette Contributor address; City; State; Zip Code Kerrville, TX 78028			Amount of Contribution (\$)	\$25.00		
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 28/29 Rpt: 31/63	
2	FILER NAME Texas Progr	essive Caucus			3	Filer ID (Ethics Commission 00086854	n Filers)
4	Date 07/09/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$5.00
_		Austin, TX 78765			_		
8		pation / Job title (See Instructions) Events Coordinator	9	Employer (See Instructions KOOP Radio 91.7 FM	5)		
	Date 08/09/2023	Full name of contributor out-of-state PAC Yancy, Max Contributor address; City; State; Zip Code Austin, TX 78765				Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Volunteer &	Events Coordinator		KOOP Radio 91.7 FM			
	Date 11/09/2023	Full name of contributor out-of-state PAC Yancy, Max Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		Austin, TX 78765					
		pation / Job title (See Instructions) Events Coordinator		Employer (See Instructions KOOP Radio 91.7 FM	5)		
	Date 12/09/2023	Full name of contributor out-of-state PAC Yancy, Max Contributor address; City; State; Zip Code Austin, TX 78765)		Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions) Events Coordinator		Employer (See Instructions KOOP Radio 91.7 FM	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/28/2023 Young, Charles Contributor address; City; State; Zip Code Friendswood, TX 77546		•	Amount of Contribution (\$)	\$120.00		
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
			<u> </u>				

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 2972P Rpt: 32/68 2 FILER NAME Texas Progressive Caucus 3 Filer ID (Ethics Commission File 00006854 2 Date 2 Zinn, Moira 6 Contributor defress; City, State, Zip Code DRIPPING SPRINGS, TX 78620 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed		MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
7 FILER NAME Texas Progressive Caucus Date 08/22/2023 Fill name of contributor Zinn, Moira Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620 Principal occupation / Job title (See Instructions) Siler ID (Ethics Commission File 00086854		The Instruction Guide explains how to complete this form.	- 1	
08/22/2023 Zinn, Moira 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	2		- 1	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	4	08/22/2023 Zinn, Moira	7	Amount of Contribution (\$) \$30.00
Text Employee	8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ons)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 33/63 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **Texas Progressive Caucus** 00086854 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/25/2023 Tucker, Clayton \$500.00 Email List 7 Contributor address; City; State; Zip Code Lampasas, TX 76550 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Organizer Trade Justice Education Fund 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	•	3 Filer ID (Ethics Commission Filers)
Sch: 1/30 Rpt: 34/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	·
07/09/2023	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1.43	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Fee
		Credit Gara ree
Complete ONLY if direct	Candidata/Officeholder name Office co	ught Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnit Onice neid
Date	Payee name	
07/16/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip C	ode
\$40.70	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI		233
Dato	Dove nome	
Date	Payee name	
07/23/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip C	ode
\$0.80	PO Box 441146	
Expenditure from		
corporate funds	Somerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAFLINDITURE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
experiolitie to belieff C/OI	1	

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

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)

Credit Card Payment	The Instruction Guide explains how to con	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/30 Rpt: 35/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	•
07/23/2023	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$4.36	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
9 Complete ONLY if direct	Condidate/Officeholder regree	office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
08/06/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	de
\$1.23	PO Box 441146	
Expenditure from		
corporate funds	Somerville, MA 02144	
PURPOSE OF	,	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	1	
Date	Payee name	
08/13/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	de
\$39.70	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
PURPOSE		(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
Oranglete Children	Open lights 10 ff and all langer	Office 1 1 1
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght 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)

Credit Card Payment	The Instruction Guide explains how to cor	plete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID	(Ethics Commission Filers)
Sch: 3/30 Rpt: 36/63	Texas Progressive Caucus	00086854	
4 Date	5 Payee name	I	
08/20/2023	ActBlue		
6 Amount (\$)	7 Payee address; City; State; Zip Co	2	
\$0.80	PO Box 441146		
Expenditure from corporate funds	Somerville, MA 02144		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Comp	
LXI LINDITORE		Check if Austin, TX, officeholder living	expense
		Credit Card Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou d	nt Office he	ld
Date	Payee name		
08/27/2023	ActBlue		
Amount (\$)	Payee address; City; State; Zip Coo	9	
\$44.27	PO Box 441146		
Expenditure from corporate funds	Somerville, MA 02144		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	Description	
EXPENDITURE	Fees	Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		Credit Card Fee	expense
		Great Gara r ee	
Complete ONLY if direct	Candidate/Officeholder name Office sout	office he	ıld
expenditure to benefit C/OI		it Office fie	iu
Date	Payee name		
09/03/2023	ActBlue		
Amount (\$)	Payee address; City; State; Zip Coo	9	
\$9.15	PO Box 441146		
Expenditure from			
corporate funds	Somerville, MA 02144		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Comp	olete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living	expense
		Credit Card Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	nt Office he	ld
S. ponditaro to borioni 0/01	•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	rs)
Sch: 4/30 Rpt: 37/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
09/10/2023	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1.19	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	ActBlue Fee	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
09/17/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip Code	
` '		
\$47.22	PO Box 441146	
- Cynanditura fram		
Expenditure from corporate funds	Somerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
09/24/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip Code	
\$1.20	PO Box 441146	
72.20		
Expenditure from		
corporate funds	Somerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EVEN DITUE	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 5/30 Rpt: 38/63	Texas Progressive Caucus 00086854
4 Date	5 Payee name
09/30/2023	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.19	PO Box 441146
Expenditure from corporate funds	Somerville, MA 02144
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beriefft C/O	
Date	Payee name
10/08/2023	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$3.41	PO Box 441146
40.12	. 6 26%
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
10/15/2023	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$39.70	PO Box 441146
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Cradit Cord Foo
	Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponentare to benefit 6/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees Advertising Expense Accounting/Banking

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 6/30 Rpt: 39/63		Texas Progressive Caucus				00086854
4	Date	5	Payee name				
	10/22/2023		ActBlue				
6	Amount (\$)	7	Payee address; City; State;	Zip Cod	le		
	\$2.39		PO Box 441146				
	Expenditure from corporate funds		Somerville, MA 02144				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T. , officeholder living expense
					Credit Card F		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	10/29/2023		ActBlue				
	Amount (\$)		Payee address; City; State;	Zip Cod	le		
	\$1.59		PO Box 441146				
	Expenditure from corporate funds		Somerville, MA 02144				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	<u> </u>	, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	11/05/2023		ActBlue				
	Amount (\$)		Payee address; City; State;	Zip Cod	le		
	\$5.99		PO Box 441146				
	Expenditure from corporate funds		Somerville, MA 02144				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T. , officeholder living expense
					Credit Card F		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice soug	ht		Office held
	me provided by Tayas F	thic	es Commission waww athies et	toto ty uc			Version V2.5.1.0hfcfh67

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/30 Rpt: 40/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	
11/12/2023	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$39.70	PO Box 441146	
Expenditure from corporate funds	Somerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Credit Cord Foo
		Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/Oi	1	
Date	Payee name	
11/19/2023	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	10
	PO Box 441146	uc
\$1.00	PO B0X 441140	
Expenditure from		
corporate funds	Somerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/26/2023	ActBlue	
		4-
Amount (\$)	Payee address; City; State; Zip Co	de
\$1.99	PO Box 441146	
Expenditure from		
corporate funds	Somerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	. 555	Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this fo	orm.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 8/30 Rpt: 41/63	Texas Progressive Caucus			00086854	
4 Date	5 Payee name		· ·		
12/03/2023	ActBlue				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$3.61	PO Box 441146				
Expenditure from corporate funds	Somerville, MA 02144				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip	otion		
OF EXPENDITURE	Fees	Chec	ck if travel outsid		plete Schedule T.
EXI ENDITORE				officeholder living	expense
		Credit	Card Fee		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht		Office he	old.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		igrit		Office file	au
Dete					
Date	Payee name				
12/10/2023	ActBlue				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$5.73	PO Box 441146				
Expenditure from					
corporate funds	Somerville, MA 02144				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip			
EXPENDITURE	Fees			de of Texas. Com officeholder living	plete Schedule T.
			Card Fee		,,
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght		Office he	eld
expenditure to benefit C/O	-1				
Date	Payee name				
12/17/2023	ActBlue				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$42.87	PO Box 441146				
Expenditure from corporate funds	Somerville, MA 02144				
PURPOSE	() -	(b) Descrip	ntion		
OF	(a) Category (See Categories listed at the top of this schedule) Fees			de of Texas. Com	plete Schedule T.
EXPENDITURE				officeholder living	expense
		Credit	Card Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght		Office he	eld
experientare to beliefit 6/01	•				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 9/30 Rpt: 42/63	Texas Progressive Caucus 00086854			
4 Date	5 Payee name			
12/24/2023	ActBlue			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1.60	PO Box 441146			
Expenditure from corporate funds	Somerville, MA 02144			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
	Credit Card Fee			
	Credit Card Fee			
O Complete Chilly if all	Condidate/Officeholder norse			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H			
,				
Date	Payee name			
12/31/2023	ActBlue			
Amount (\$)	Payee address; City; State; Zip Code			
\$17.19	PO Box 441146			
Expenditure from corporate funds	Somerville, MA 02144			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Credit Card Fee			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
expenditure to benefit C/OI	п			
Date	Payee name			
09/27/2023	Aguilar, Francisco			
Amount (\$)	Payee address; City; State; Zip Code			
\$200.00	3414 South Unviersity Drive			
+233,00	Apt 7			
Expenditure from				
corporate funds	Fort Worth, TX 76109			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Logo Development			
	Logo Development			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/30 Rpt: 43/63	Texas Progressive Caucus 00086854
4 Date	5 Payee name
08/24/2023	Coastal Bend Tejano Democrats
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	2309 Blue Star
Expenditure from	Corpus Christi, TX 78414
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Event Sponsorship
	Event opensorsp
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Gree	
Date	Payee name
07/16/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Pkwy
φ0.40	1000 / imprilatedate i Kwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Email service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialture to beliefit C/O	
Date	Payee name
07/16/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$12.00	1600 Amphitheatre Pkwy
Ψ12.00	1000 Amphiliteatie i kwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Domains
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 11/30 Rpt: 44/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
08/16/2023	Google LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$6.40	1600 Amphitheatre Pkwy	
Expenditure from		
corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
	Check if Austin, TX, officeholder living expense Email service	
	Littali Scivice	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date		_
	Payee name	
09/16/2023	Google LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.40	1600 Amphitheatre Pkwy	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
	Check if Austin, TX, officeholder living expense Email service	
	Littali Service	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_
Date	Payee name	
10/16/2023	Google LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.40	1600 Amphitheatre Pkwy	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Email service	
	Littali Service	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Ol	y	
		_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Ivertising Expense Event Expense Loan Repayment/Reimbu

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

Fees Offic
Food/Beverage Expense Polli
Git/Awards/Memorials Expense Print
Legal Services Sala

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/30 Rpt: 45/63	Texas Progressive Caucus 00086854
4 Date	5 Payee name
11/16/2023	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Email service
	Email Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
12/16/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Pkwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Email service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
08/07/2023	Harland Clarke Check Printing
Amount (\$)	Payee address; City; State; Zip Code
\$19.41	PO Box 27207
Expenditure from	
corporate funds	Salt Lake City, UT 84127
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Checks
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

Credit Card F dyment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 13/30 Rpt: 46/63	Texas Progressive Caucus		00086854	
4 Date	5 Payee name		•	
07/13/2023	Nationbuilder			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$55.00	6515 W Sunset Blvd			
	Ste 440			
Expenditure from corporate funds	Los Angeles, CA 90028			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	ı <u>—</u>	el outside of Texas. Com	
EXI ENDITORE		Check if Aust Database	tin, TX, officeholder living	g expense
		Dalabase		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	laht.	Office h	old
expenditure to benefit C/O		igiit	Office In	ciu
Data				
Date	Payee name			
08/03/2023	Nationbuilder			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$2.90	6515 W Sunset Blvd			
Expenditure from	Ste 440			
corporate funds	Los Angeles, CA 90028			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	ı <u>—</u>	el outside of Texas. Com tin, TX, officeholder living	
		Database	,	5
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office h	eld
expenditure to benefit C/O	H			
Date	Payee name			
08/13/2023	Nationbuilder			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$64.00	6515 W Sunset Blvd			
	Ste 440			
Expenditure from corporate funds	Los Angeles, CA 90028			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Office Overhead/Rental Expense		el outside of Texas. Com	pplete Schedule T.
EXPENDITURE	,	Check if Aust	tin, TX, officeholder living	g expense
		Database		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office h	eld
SAPORALATO TO BOHOIL O/OI				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/30 Rpt: 47/63	Texas Progressive Caucus 00086854
4 Date	5 Payee name
09/13/2023	Nationbuilder
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$64.00	6515 W Sunset Blvd
	Ste 440
Expenditure from corporate funds	Los Angeles, CA 90028
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Database
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/13/2023	Nationbuilder
Amount (\$)	Payee address; City; State; Zip Code
\$64.00	6515 W Sunset Blvd
	Ste 440
Expenditure from corporate funds	Los Angeles, CA 90028
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Database
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/02/2023	Nationbuilder
Amount (\$)	Payee address; City; State; Zip Code
\$1.00	6515 W Sunset Blvd
¥=	Ste 440
Expenditure from	
corporate funds	Los Angeles, CA 90028
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Database
	Database
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	o
, , , , , , , , , , , , , , , , , , , ,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Credit Card Payment	The Instruction Guide explains how to comple	,
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 15/30 Rpt: 48/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	·
11/13/2023	Nationbuilder	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$77.00	6515 W Sunset Blvd	
	Ste 440	
Expenditure from corporate funds	Los Angeles, CA 90028	
8 PURPOSE OF	, , ,	Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Database
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	1	
Date	Payee name	
12/06/2023	Nationbuilder	
Amount (\$)	Payee address; City; State; Zip Code	
\$2.64	6515 W Sunset Blvd	
	Ste 440	
Expenditure from corporate funds	Los Angeles, CA 90028	
PURPOSE OF	, , ,	Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Database
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	-	
Date	Payee name	
12/13/2023	Nationbuilder	
Amount (\$)	Payee address; City; State; Zip Code	
\$94.00	6515 W Sunset Blvd	
	Ste 440	
Expenditure from corporate funds	Los Angeles, CA 90028	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Database
Organists ONII Wife diagram	Out if the 10ff on holding rooms	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

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

.,	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 16/30 Rpt: 49/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	•
08/22/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I laht Office held
expenditure to benefit C/O		•
Date	Payee name	
08/22/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Co	nda
\$0.79	3180 18th Street Suite 100	oue -
Ψ0.19	3100 10th Street Strite 100	
Expenditure from	San Francisco CA 04110	
corporate funds	San Francisco, CA 94110	La s
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel susside of Taylor Complete Schoolule T
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/O	Н	
Date	Payee name	
08/23/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$0.55	3180 18th Street Suite 100	
, , , , ,		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Fee
		Stout Guid Foo
Complete ONLY if direct	Candidate/Officeholder name Office sou	lght Office held
expenditure to benefit C/O		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	- · · <u>-</u> · · (- · · · · · · · · · · · · · · · ·	,
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission	n Filers)
Sch: 17/30 Rpt: 50/63	Texas Progressive Caucus		00086854	
4 Date	5 Payee name	•		
08/31/2023	Stripe			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$0.55	3180 18th Street Suite 100			
Expenditure from corporate funds	San Francisco, CA 94110			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Fees	I <u>—</u>	side of Texas. Complete Schedule T. K, officeholder living expense	
		Credit Card Fee		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ight	Office held	
expenditure to benefit C/OI		,y,,,	Office field	
Data	Davis and a			
Date	Payee name			
09/02/2023	Stripe			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$0.79	3180 18th Street Suite 100			
Expenditure from				
corporate funds	San Francisco, CA 94110			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	l —	side of Texas. Complete Schedule T.	
LXFLNDITORL			K, officeholder living expense	
		Credit Card Fee	9	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ıght	Office held	
experientare to benefit ever				
Date	Payee name			
09/02/2023	Stripe			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$1.77	3180 18th Street Suite 100			
Expenditure from corporate funds	San Francisco, CA 94110			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees		side of Texas. Complete Schedule T.	
EXPENDITURE		_	K, officeholder living expense	
		Credit Card Fee	9	
Complete ONLY if direct	Candidate/Officeholder name Office so	ıght	Office held	
expenditure to benefit C/OI	1			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1. Total names Calcadate 54		-)
1 Total pages Schedule F1:		>)
Sch: 18/30 Rpt: 51/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
09/02/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
\$3,00		
Expenditure from	Can Francisco OA 04140	
corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Credit Card Fee	
	Gredit Card Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
experialities to belieff C/O		
Date	Payee name	
09/02/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
Ψ0.13	0100 104. 04000 Outle 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	л 	
Date	Payee name	
09/14/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.20	3180 18th Street Suite 100	
Φ5.20	2100 10(1) 2(1eet 20)(e 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
LAI LINDITORE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H	
		fi 0=

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	Filers)
Sch: 19/30 Rpt: 52/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
09/22/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Credit Card Fee	
	Credit Calu Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
09/22/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
Evnanditura from		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Credit Card Fee	
	orean outer co	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
	T	
Date	Payee name	
09/24/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
S. ponditaro to borioni 0/01		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

Credit Card Payment	The Instruction Guide explains how to cor	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 20/30 Rpt: 53/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	·
09/30/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
9 Complete ONLY if direct	Condidate/Office helder no me	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
10/02/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$1.77	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE OF	,	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held
expenditure to benefit C/O	1	
Date	Payee name	
10/02/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE		(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
Oranalata Chii V. II	Condidate (Office helden ne	Off.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 21/30 Rpt: 54/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
10/02/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Credit Card Fee	
	Great Sara Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_
Date	Payee name	
10/05/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
Evpanditura from		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Credit Card Fee	
	Great Gara Fee	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_
Date	Payee name	
10/14/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.20	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialitie to beliefft C/OI	1	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 22/30 Rpt: 55/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	_
10/22/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Payee name	=
10/22/2023	Stripe	
		_
Amount (\$)	Payee address; City; State; Zip Code 3180 18th Street Suite 100	
\$0.79	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
LXFLNDITORL	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/24/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
— Foresediture from		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
LAFENDITORE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Operation Objects "	On this to 10 ff a shall an a sure	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 23/30 Rpt: 56/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	
10/31/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht Office held
Date	Payee name	
11/02/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$1.77	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Credit Card Fee
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit C/O		onice neid
Data		
Date	Payee name	
11/02/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Cod	е
\$0.55	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 24/30 Rpt: 57/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	_
11/02/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$0.79	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Data	Device same	_
Date	Payee name	
11/22/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Expenditure from		
corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Credit Card Fee	
	Credit Card Fee	
Commission ONII V if dispose	Condidate/Officeholder name Office sought Office hold	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
		_
Date	Payee name	
11/22/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
— Foresediture from		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
onponential to belief 0/01		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/30 Rpt: 58/63	Texas Progressive Caucus 00086854
4 Date	5 Payee name
11/23/2023	Stripe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
Expenditure from	
corporate funds	San Francisco, CA 94110
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/30/2023	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
Expenditure from corporate funds	San Francisco, CA 94110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Fee
	Ground Gura 1 do
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/02/2023	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
\$5.50	
Expenditure from corporate funds	San Francisco, CA 94110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
-	Credit Card Fee
	Great Cara i ee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wat The Instruction Guide explains how to com	pes/Contract Labor OTHER (enter a category not listed above) plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 26/30 Rpt: 59/63	Texas Progressive Caucus	00086854
4 Date	5 Payee name	
12/02/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	9
\$0.79	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Fee
		Great Gara i de
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O		differential
Dete		
Date	Payee name	
12/03/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$1.77	3180 18th Street Suite 100	
Evnondituro from		
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
		000
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
Date	Payee name	
12/09/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Credit Card Fee
Oranahi Ottiviii	Condidate (Office hall	0" 111
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
2 1 2 2010 3701		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 27/30 Rpt: 60/63	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
12/09/2023	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$3.24	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Credit Card Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	н	
Date	Payee name	=
12/09/2023	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	_
\$0.79	3180 18th Street Suite 100	
Ψ0.73	STOO TOUT SHEET SUITE TOO	
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Credit Card Fee	
	Great Guid i de	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Davida nama	_
12/09/2023	Payee name Stripe	
	•	
Amount (\$) \$0.79	Payee address; City; State; Zip Code 3180 18th Street Suite 100	
Φ0.79	3100 10th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
LA LABITORE	Credit Cord Foo	
	Credit Card Fee	
Complete ONII V If all a	Condidate/Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Opnations Made By

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

1 Total pages Schedule F1: Sch: 28/30 Rpt: 61/63 Texas Progressive Caucus 5 Payee name 12/09/2023 Stripe 7 Payee address; City; State; Zip Code \$0.79 San Francisco, CA 94110	ission Filers)
Sch: 28/30 Rpt: 61/63 Texas Progressive Caucus 00086854 4 Date 12/09/2023 5 Payee name Stripe 6 Amount (\$) 7 Payee address; City; State; Zip Code 3180 18th Street Suite 100 Expenditure from corporate funds San Francisco, CA 94110	
12/09/2023 Stripe 6 Amount (\$) 7 Payee address; City; State; Zip Code \$0.79 \$180 18th Street Suite 100 Expenditure from corporate funds San Francisco, CA 94110	
6 Amount (\$) 7 Payee address; City; State; Zip Code \$0.79 \$180 18th Street Suite 100 Expenditure from corporate funds San Francisco, CA 94110	
\$0.79 3180 18th Street Suite 100 Expenditure from corporate funds San Francisco, CA 94110	
\$0.79 3180 18th Street Suite 100 Expenditure from corporate funds San Francisco, CA 94110	
Expenditure from corporate funds San Francisco, CA 94110	
Corporate funds San Francisco, CA 94110	
9 DUDDOSE (6) Cottons	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Credit Card Fee	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
12/09/2023 Stripe	
Amount (\$) Payee address; City; State; Zip Code	
\$0.42 3180 18th Street Suite 100	
40.42 0100 10th Officer Office 100	
Expenditure from corporate funds San Francisco, CA 94110	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Credit Card Fee	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
12/09/2023 Stripe	
Amount (\$) Payee address; City; State; Zip Code	
\$3.24 3180 18th Street Suite 100	
Expenditure from corporate funds San Francisco, CA 94110	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE Check if Austin, TX, officeholder living expense	
Credit Card Fee	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

SCHEDULE F1

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

Event Expense Loan Repayment/Reimburseme
Fees Office Overhead/Rental Expens
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	Credit Card Payment The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 29/30 Rpt: 62/63	Texas Progressive Caucus	00086854		
4 Date	5 Payee name	•		
12/13/2023	Stripe			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$0.55	3180 18th Street Suite 100			
Expenditure from corporate funds	San Francisco, CA 94110			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Check if Austin, TX, officeholder living expense		
		Credit Card Fee		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held		
<u> </u>				
Date	Payee name			
12/22/2023	Stripe			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$0.55	3180 18th Street Suite 100			
Expenditure from				
corporate funds	San Francisco, CA 94110			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Credit Card Fee		
		Great Gara rec		
Complete ONLY if direct	Candidate/Officeholder name Office sou	oht Office held		
expenditure to benefit C/OH				
Date	Davis name			
12/22/2023	Payee name Stripe			
		do.		
Amount (\$) \$0.79	Payee address; City; State; Zip Co 3180 18th Street Suite 100	ue		
Φ0.79	2100 TOLL SHEEL SHIFE TOO			
Expenditure from	Can Francisco CA 04110			
corporate funds	San Francisco, CA 94110			
PURPOSE OF	,	(b) Description Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense		
		Credit Card Fee		
Complete ONLY if direct	Candidate/Officeholder name Office sout	ght Office held		
expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 30/30 Rpt: 63/63	Texas Progressive Caucus	00086854	
4 Date	5 Payee name	<u>'</u>	
12/24/2023	Stripe		
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de	
\$0.55	3180 18th Street Suite 100		
Expenditure from corporate funds	San Francisco, CA 94110		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit Card Fee	
		ordan oda i od	
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	tht Office held	
expenditure to benefit C/O		onide field	
Data			
Date	Payee name		
12/28/2023	Stripe		
Amount (\$)	Payee address; City; State; Zip Coo	de	
\$12.55	3180 18th Street Suite 100		
Expenditure from corporate funds	San Francisco, CA 94110		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.	
		Credit Card Fee	
		ordan dara rec	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office soug	pht Office held	
expenditure to benefit C/O		onice netu	