

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Every State Blue - Texas	13 Filer ID (Ethics Commission Filers) 00087094
--	---

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,376.13
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,184.10
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,396.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Jonathan Zucker

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Every State Blue - Texas		18 Filer ID (Ethics Commission Filers) 00087094
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,376.13
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,184.10
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 158.50
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/290 Rpt: 4/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/290 Rpt: 5/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/290 Rpt: 6/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> 6 Contributor address; City; State; Zip Code Vallejo, CA 94589	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) None
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/290 Rpt: 7/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22201	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/290 Rpt: 8/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22201	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/290 Rpt: 9/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Dallas, TX 75287		
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) self
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/290 Rpt: 10/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> 6 Contributor address; City; State; Zip Code Bellville, TX 77418	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/290 Rpt: 11/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> 6 Contributor address; City; State; Zip Code Bellville, TX 77418	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> Contributor address; City; State; Zip Code Westlake Village, CA 91361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> Contributor address; City; State; Zip Code Westlake Village, CA 91361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> Contributor address; City; State; Zip Code Westlake Village, CA 91361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> Contributor address; City; State; Zip Code Westlake Village, CA 91361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/290 Rpt: 12/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> 6 Contributor address; City; State; Zip Code Westlake Village, CA 91361	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James <hr/> Contributor address; City; State; Zip Code Westlake Village, CA 91361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/290 Rpt: 13/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/290 Rpt: 14/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/290 Rpt: 15/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/290 Rpt: 16/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/290 Rpt: 17/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) retired teacher
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/290 Rpt: 18/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Paylocity
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/290 Rpt: 19/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Paylocity
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/290 Rpt: 20/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Calvary Episcopal School
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/290 Rpt: 21/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Austin, TX 78735		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78735		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/290 Rpt: 22/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beery, Colleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005-5603	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/290 Rpt: 23/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
8 Principal occupation / Job title (See Instructions) Consulting Engineer		9 Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/290 Rpt: 24/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
8 Principal occupation / Job title (See Instructions) Consulting Engineer		9 Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005-5603		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/290 Rpt: 25/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76005-5603	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Consulting Engineer		9 Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/290 Rpt: 26/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/290 Rpt: 27/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/290 Rpt: 28/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78413	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickham, Erin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/290 Rpt: 29/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/290 Rpt: 30/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/290 Rpt: 31/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy <hr/> Contributor address; City; State; Zip Code Evanston, IL 60201	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/290 Rpt: 32/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Larchmont, NY 10538		
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Clifford Chance
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Larchmont, NY 10538		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Larchmont, NY 10538		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Lucinda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Carrollton, TX 75006		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) retired
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Lucinda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Carrollton, TX 75006		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/290 Rpt: 33/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Lucinda. M.	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Carrollton, TX 75006	
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) retired
Date 07/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Lucinda. M.	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Carrollton, TX 75006	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/290 Rpt: 34/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/290 Rpt: 35/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/290 Rpt: 36/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/290 Rpt: 37/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/290 Rpt: 38/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 08/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/290 Rpt: 39/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Plano, TX 75075-4009		
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) JP Morgan Chase
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Plano, TX 75075-4009		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Joanna	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78765		
Principal occupation / Job title (See Instructions) IT support		Employer (See Instructions) The University of Texas at Austin
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/290 Rpt: 40/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) artist		9 Employer (See Instructions) self
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/290 Rpt: 41/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code New York, NY 10011		
8 Principal occupation / Job title (See Instructions) artist		9 Employer (See Instructions) self
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/290 Rpt: 42/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/290 Rpt: 43/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/290 Rpt: 44/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/290 Rpt: 45/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Included Health
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/290 Rpt: 46/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Currently unemployed
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3343	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/290 Rpt: 47/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75214-3343		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Currently unemployed
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214-3343		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214-3343		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214-3343		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214-3343		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/290 Rpt: 48/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Weaver
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/290 Rpt: 49/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Weaver
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/290 Rpt: 50/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Weaver
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/290 Rpt: 51/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/290 Rpt: 52/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/290 Rpt: 53/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, John <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) United Airlines
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, John <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) United Airlines
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, John <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) United Airlines
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, John <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) United Airlines
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/290 Rpt: 54/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) HR Specialist		9 Employer (See Instructions) Texas Department of Banking
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/290 Rpt: 55/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR Specialist		9 Employer (See Instructions) Texas Department of Banking
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/290 Rpt: 56/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR Specialist		9 Employer (See Instructions) Texas Department of Banking
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/290 Rpt: 57/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/290 Rpt: 58/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/290 Rpt: 59/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78749		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/290 Rpt: 60/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis-Jackson, Jamie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Disabled
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/290 Rpt: 61/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code Dallas, TX 75235		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75235		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75235		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75235		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dallas, TX 75219-5516		
Principal occupation / Job title (See Instructions) retired teacher and state representative		Employer (See Instructions) retired teacher and state representative

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/290 Rpt: 62/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-5516	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired teacher and state representative		9 Employer (See Instructions) retired teacher and state representative
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher and state representative		Employer (See Instructions) retired teacher and state representative
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher and state representative		Employer (See Instructions) retired teacher and state representative
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/290 Rpt: 63/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/290 Rpt: 64/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Giddings, TX 78942		
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Giddings, TX 78942		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Giddings, TX 78942		
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Giddings, TX 78942		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Giddings, TX 78942		
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/290 Rpt: 65/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/290 Rpt: 66/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Giddings, TX 78942		
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) retired
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/290 Rpt: 67/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) BSA		9 Employer (See Instructions) RGA
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/290 Rpt: 68/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) BSA		9 Employer (See Instructions) RGA
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/290 Rpt: 69/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> 6 Contributor address; City; State; Zip Code Saginaw, TX 76179	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Standard Meat
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/290 Rpt: 70/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> 6 Contributor address; City; State; Zip Code Saginaw, TX 76179	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Standard Meat
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/290 Rpt: 71/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) home repair		9 Employer (See Instructions) self
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/290 Rpt: 72/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) home repair		9 Employer (See Instructions) self
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/290 Rpt: 73/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) home repair		9 Employer (See Instructions) self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/290 Rpt: 74/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/290 Rpt: 75/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/290 Rpt: 76/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired Spanish professro		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired Spanish professro		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/290 Rpt: 77/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired Spanish profesro		9 Employer (See Instructions) retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish profesro		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish profesro		Employer (See Instructions) retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish profesro		Employer (See Instructions) retired
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/290 Rpt: 78/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> 6 Contributor address; City; State; Zip Code THE COLONY, TX 75056	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		9 Employer (See Instructions) Mobomo, LLC
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/290 Rpt: 79/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> 6 Contributor address; City; State; Zip Code THE COLONY, TX 75056	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		9 Employer (See Instructions) Mobomo, LLC
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/290 Rpt: 80/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> 6 Contributor address; City; State; Zip Code THE COLONY, TX 75056	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		9 Employer (See Instructions) Mobomo, LLC
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/290 Rpt: 81/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> 6 Contributor address; City; State; Zip Code Manchaca, TX 78652	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		9 Employer (See Instructions) Self
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/290 Rpt: 82/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$1.80
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/290 Rpt: 83/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/290 Rpt: 84/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> 6 Contributor address; City; State; Zip Code ljamsville, MD 21754	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/290 Rpt: 85/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> 6 Contributor address; City; State; Zip Code ljamsville, MD 21754	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/290 Rpt: 86/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie 6 Contributor address; City; State; Zip Code Ijamsville, MD 21754	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/290 Rpt: 87/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78240	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Insurance broker		9 Employer (See Instructions) Self employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/290 Rpt: 88/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78240		
8 Principal occupation / Job title (See Instructions) Insurance broker		9 Employer (See Instructions) Self employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/290 Rpt: 89/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78247		
8 Principal occupation / Job title (See Instructions) project manager		9 Employer (See Instructions) UTSA
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/290 Rpt: 90/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) project manager		9 Employer (See Instructions) UTSA
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/290 Rpt: 91/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> 6 Contributor address; City; State; Zip Code Malden, MA 02148	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) NGP VAN
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/290 Rpt: 92/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> 6 Contributor address; City; State; Zip Code Port Isabel, TX 78578	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) retired
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/290 Rpt: 93/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> 6 Contributor address; City; State; Zip Code Port Isabel, TX 78578	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) retired
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/290 Rpt: 94/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> 6 Contributor address; City; State; Zip Code Port Isabel, TX 78578	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) retired
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/290 Rpt: 95/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/290 Rpt: 96/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Idona <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/290 Rpt: 97/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75701	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/290 Rpt: 98/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Tyler, TX 75701		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/290 Rpt: 99/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired Nurse Practitioner		9 Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/290 Rpt: 100/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired Nurse Practitioner		9 Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/290 Rpt: 101/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) retired
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/290 Rpt: 102/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/290 Rpt: 103/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78746		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/290 Rpt: 104/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/290 Rpt: 105/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/290 Rpt: 106/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78254	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		9 Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/290 Rpt: 107/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78254	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		9 Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jacob <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Temporary Business Manager for Law School Publications		Employer (See Instructions) Leading Edge Personnel/St. Mary's University
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/290 Rpt: 108/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> 6 Contributor address; City; State; Zip Code Lexington, TX 78947-6231	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) bookkeeper		9 Employer (See Instructions) self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/290 Rpt: 109/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> 6 Contributor address; City; State; Zip Code Lexington, TX 78947-6231	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) bookkeeper		9 Employer (See Instructions) self
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947-6231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/290 Rpt: 110/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33155	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/290 Rpt: 111/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) VOLUNTEERISM		9 Employer (See Instructions) RETIRED
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/290 Rpt: 112/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) VOLUNTEERISM		9 Employer (See Instructions) RETIRED
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/290 Rpt: 113/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/290 Rpt: 114/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75149	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/290 Rpt: 115/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75149	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> Contributor address; City; State; Zip Code Hull, TX 77564	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/290 Rpt: 116/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> 6 Contributor address; City; State; Zip Code Hull, TX 77564	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions) Government
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> Contributor address; City; State; Zip Code Hull, TX 77564	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> Contributor address; City; State; Zip Code Hull, TX 77564	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> Contributor address; City; State; Zip Code Hull, TX 77564	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont <hr/> Contributor address; City; State; Zip Code Hull, TX 77564	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/290 Rpt: 117/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code Spicewood, TX 78669	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/290 Rpt: 118/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code Spicewood, TX 78669	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/290 Rpt: 119/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code Spicewood, TX 78669	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/290 Rpt: 120/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77450	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Project Director		9 Employer (See Instructions) UT MD Anderson
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/290 Rpt: 121/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Houston, TX 77096		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/290 Rpt: 122/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/290 Rpt: 123/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code Los Altos, CA 94022		
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) self
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/290 Rpt: 124/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/290 Rpt: 125/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen <hr/> Contributor address; City; State; Zip Code Oak Lawn, IL 60453	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Editor/Photojournalist		Employer (See Instructions) Nexstar

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/290 Rpt: 126/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Oak Lawn, IL 60453		
8 Principal occupation / Job title (See Instructions) Editor/Photojournalist		9 Employer (See Instructions) Nexstar
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Oak Lawn, IL 60453		
Principal occupation / Job title (See Instructions) Editor/Photojournalist		Employer (See Instructions) Nexstar
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oak Lawn, IL 60453		
Principal occupation / Job title (See Instructions) Editor/Photojournalist		Employer (See Instructions) Nexstar
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oak Lawn, IL 60453		
Principal occupation / Job title (See Instructions) Editor/Photojournalist		Employer (See Instructions) Nexstar
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefner, Allen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oak Lawn, IL 60453		
Principal occupation / Job title (See Instructions) Editor/Photojournalist		Employer (See Instructions) Nexstar

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/290 Rpt: 127/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/290 Rpt: 128/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelch, Linda <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/290 Rpt: 129/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Construction		9 Employer (See Instructions) Kennedy A Plus Builders
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/290 Rpt: 130/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Construction		9 Employer (See Instructions) Kennedy A Plus Builders
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa <hr/> Contributor address; City; State; Zip Code Washington DC, DC 20011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa <hr/> Contributor address; City; State; Zip Code Washington DC, DC 20011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/290 Rpt: 131/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/290 Rpt: 132/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$2.75
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$2.75
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/290 Rpt: 133/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> 6 Contributor address; City; State; Zip Code Okatie, SC 29909	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/290 Rpt: 134/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> 6 Contributor address; City; State; Zip Code Okatie, SC 29909	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/290 Rpt: 135/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> 6 Contributor address; City; State; Zip Code Okatie, SC 29909	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/290 Rpt: 136/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Okatie, SC 29909		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/290 Rpt: 137/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Disabled		9 Employer (See Instructions) N/A
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/290 Rpt: 138/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code CONROE, TX 77301		
8 Principal occupation / Job title (See Instructions) Disabled		9 Employer (See Instructions) N/A
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/290 Rpt: 139/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code New York, NY 10012		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/290 Rpt: 140/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10012	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/290 Rpt: 141/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/290 Rpt: 142/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/290 Rpt: 143/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/290 Rpt: 144/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	7 Amount of Contribution (\$) \$2.70
6 Contributor address; City; State; Zip Code Dallas, TX 75230		
8 Principal occupation / Job title (See Instructions) Asset Manager		9 Employer (See Instructions) West Rock Properties
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$2.70
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/290 Rpt: 145/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	7 Amount of Contribution (\$) \$9.00
6 Contributor address; City; State; Zip Code Dallas, TX 75230		
8 Principal occupation / Job title (See Instructions) Asset Manager		9 Employer (See Instructions) West Rock Properties
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, George	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Fremont, CA 94539		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, George	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Fremont, CA 94539		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, George	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Fremont, CA 94539		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/290 Rpt: 146/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, George <hr/> 6 Contributor address; City; State; Zip Code Fremont, CA 94539	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) self
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/290 Rpt: 147/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> 6 Contributor address; City; State; Zip Code GRANBURY, TX 76049	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Pecan Drug
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/290 Rpt: 148/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> 6 Contributor address; City; State; Zip Code GRANBURY, TX 76049	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Pecan Drug
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/290 Rpt: 149/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) lead software engineer		9 Employer (See Instructions) Rapid7
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/290 Rpt: 150/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) lead software engineer		9 Employer (See Instructions) Rapid7
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/290 Rpt: 151/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) USDG
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/290 Rpt: 152/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) USDG
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/290 Rpt: 153/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code The Colony, TX 75056		
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) USDG
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, JoAnn	Amount of Contribution (\$) \$4.68
Contributor address; City; State; Zip Code Austin, TX 78731-6080		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, JoAnn	Amount of Contribution (\$) \$4.68
Contributor address; City; State; Zip Code Austin, TX 78731-6080		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, JoAnn	Amount of Contribution (\$) \$4.68
Contributor address; City; State; Zip Code Austin, TX 78731-6080		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/290 Rpt: 154/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/290 Rpt: 155/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/290 Rpt: 156/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/290 Rpt: 157/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/290 Rpt: 158/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/290 Rpt: 159/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Edinburg, TX 78539		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Edinburg, TX 78539		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/290 Rpt: 160/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> 6 Contributor address; City; State; Zip Code Edinburg, TX 78539	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/290 Rpt: 161/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Special Ed consultant		9 Employer (See Instructions) TSBVI
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/290 Rpt: 162/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Special Ed consultant		9 Employer (See Instructions) TSBVI
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/290 Rpt: 163/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Special Ed consultant		9 Employer (See Instructions) TSBVI
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/290 Rpt: 164/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/290 Rpt: 165/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/290 Rpt: 166/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> 6 Contributor address; City; State; Zip Code Commercer, TX 75428	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired educator		9 Employer (See Instructions) None
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/290 Rpt: 167/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Commerce, TX 75428		
8 Principal occupation / Job title (See Instructions) Retired educator		9 Employer (See Instructions) None
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/290 Rpt: 168/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/290 Rpt: 169/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/290 Rpt: 170/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Flower Mound, TX 75028		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/290 Rpt: 171/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Flower Mound, TX 75028		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/290 Rpt: 172/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75028	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/290 Rpt: 173/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Trophy Club, TX 76262		
8 Principal occupation / Job title (See Instructions) Voting rights activist		9 Employer (See Instructions) Retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$2.25
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$2.25
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/290 Rpt: 174/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Self employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/290 Rpt: 175/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Voting rights activist		9 Employer (See Instructions) Retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/290 Rpt: 176/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Self employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/290 Rpt: 177/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Voting rights activist		9 Employer (See Instructions) Retired
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Monica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rodriguez and Morgan Law Offices, PLLC
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Monica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rodriguez and Morgan Law Offices, PLLC
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Monica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rodriguez and Morgan Law Offices, PLLC
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Monica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rodriguez and Morgan Law Offices, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/290 Rpt: 178/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Monica <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Rodriguez and Morgan Law Offices, PLLC
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/290 Rpt: 179/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/290 Rpt: 180/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code New York, NY 10011		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sarah	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/290 Rpt: 181/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Editor and project manager		9 Employer (See Instructions) ION Translations, LLC
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/290 Rpt: 182/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Editor and project manager		9 Employer (See Instructions) ION Translations, LLC
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/290 Rpt: 183/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Adam <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77396-4144	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) IT Business Analyst		9 Employer (See Instructions) Symmetry Energy Solutions
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Adam <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-4144	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) IT Business Analyst		Employer (See Instructions) Symmetry Energy Solutions
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/290 Rpt: 184/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> 6 Contributor address; City; State; Zip Code Altadena, CA 91001	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/290 Rpt: 185/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> 6 Contributor address; City; State; Zip Code Altadena, CA 91001	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/290 Rpt: 186/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/290 Rpt: 187/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/290 Rpt: 188/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/290 Rpt: 189/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Weatherford, TX 76086		
8 Principal occupation / Job title (See Instructions) Meeting Consultant		9 Employer (See Instructions) Self Employed
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/290 Rpt: 190/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76086	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Meeting Consultant		9 Employer (See Instructions) Self Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/290 Rpt: 191/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> 6 Contributor address; City; State; Zip Code Mcallen, TX 78501	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Ut health
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/290 Rpt: 192/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> 6 Contributor address; City; State; Zip Code Mcallen, TX 78501	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Ut health
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ut health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/290 Rpt: 193/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Roel <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Ut health
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/290 Rpt: 194/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> 6 Contributor address; City; State; Zip Code Burlingame, CA 94010	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Senior Paralegal		9 Employer (See Instructions) Miller & Olson, LLP
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/290 Rpt: 195/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> 6 Contributor address; City; State; Zip Code Burlingame, CA 94010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Senior Paralegal		9 Employer (See Instructions) Miller & Olson, LLP
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson, LLP
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus <hr/> Contributor address; City; State; Zip Code South Bend, IN 46617	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Collectors Holdings
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus <hr/> Contributor address; City; State; Zip Code South Bend, IN 46617	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Collectors Holdings

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/290 Rpt: 196/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> 6 Contributor address; City; State; Zip Code Highland Park, IL 60035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS-AVILES, SOCORRO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/290 Rpt: 197/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS-AVILES, SOCORRO	7 Amount of Contribution (\$) \$0.50
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS-AVILES, SOCORRO	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/290 Rpt: 198/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NXP Semiconductors
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/290 Rpt: 199/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NXP Semiconductors
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichman, Henry <hr/> Contributor address; City; State; Zip Code Albany, CA 94706	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/290 Rpt: 200/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Grace <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22307	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) US DOJ
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Grace <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22307	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) US DOJ
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/290 Rpt: 201/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91106	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/290 Rpt: 202/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91106	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/290 Rpt: 203/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> 6 Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/290 Rpt: 204/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> 6 Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/290 Rpt: 205/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> 6 Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/290 Rpt: 206/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/290 Rpt: 207/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/290 Rpt: 208/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11218	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/290 Rpt: 209/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/290 Rpt: 210/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/290 Rpt: 211/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/290 Rpt: 212/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/290 Rpt: 213/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Emily <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/290 Rpt: 214/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Wilkinson Barker Knauer
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/290 Rpt: 215/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> 6 Contributor address; City; State; Zip Code Clifton, TX 76634	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Licensed Professional Counselor		9 Employer (See Instructions) Retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Thomas <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/290 Rpt: 216/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/290 Rpt: 217/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/290 Rpt: 218/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/290 Rpt: 219/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code Stephenville, TX 76401	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/290 Rpt: 220/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code Stephenville, TX 76401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/290 Rpt: 221/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> 6 Contributor address; City; State; Zip Code Poolville, TX 76487	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/290 Rpt: 222/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> 6 Contributor address; City; State; Zip Code Poolville, TX 76487	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/290 Rpt: 223/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> 6 Contributor address; City; State; Zip Code Poolville, TX 76487	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90065	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90065	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Semi-Retired physician		Employer (See Instructions) N/A
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Semi-Retired physician		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/290 Rpt: 224/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Semi-Retired physician		9 Employer (See Instructions) N/A
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Semi-Retired physician		Employer (See Instructions) N/A
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Semi-Retired physician		Employer (See Instructions) N/A
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Semi-Retired physician		Employer (See Instructions) N/A
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/290 Rpt: 225/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/290 Rpt: 226/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78258		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/290 Rpt: 227/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/290 Rpt: 228/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code Pasadena, TX 77503		
8 Principal occupation / Job title (See Instructions) Technical Writer/Editor		9 Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/290 Rpt: 229/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77503	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Technical Writer/Editor		9 Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, Charlene <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, Charlene <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/290 Rpt: 230/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, Charlene <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, Charlene <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/290 Rpt: 231/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> 6 Contributor address; City; State; Zip Code Hurst, TX 76053	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/290 Rpt: 232/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> 6 Contributor address; City; State; Zip Code Hurst, TX 76053	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/290 Rpt: 233/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/290 Rpt: 234/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Brooklyn, NY 11238		
8 Principal occupation / Job title (See Instructions) Filmmaker		9 Employer (See Instructions) Self
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brooklyn, NY 11238		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Lin	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Burton, WA 98013		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Houston, TX 77008-3914		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Houston, TX 77008-3914		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/290 Rpt: 235/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William 6 Contributor address; City; State; Zip Code Houston, TX 77008-3914	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/290 Rpt: 236/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76164		
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Self
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76164		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/290 Rpt: 237/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) N/A
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/290 Rpt: 238/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) N/A
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smyth, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/290 Rpt: 239/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Frisco, TX 75035		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/290 Rpt: 240/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/290 Rpt: 241/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Frisco, TX 75035		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/290 Rpt: 242/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/290 Rpt: 243/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Ann Margurite <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Business Systems Specialist		Employer (See Instructions) Saint-Gobain
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Ann Margurite <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Business Systems Specialist		Employer (See Instructions) Saint-Gobain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/290 Rpt: 244/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Ann Margurite	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Stephenville, TX 76401		
8 Principal occupation / Job title (See Instructions) Business Systems Specialist		9 Employer (See Instructions) Saint-Gobain
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Ann Margurite	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Stephenville, TX 76401		
Principal occupation / Job title (See Instructions) Business Systems Specialist		Employer (See Instructions) Saint-Gobain
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/290 Rpt: 245/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/290 Rpt: 246/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/290 Rpt: 247/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Sharon <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) VP, National Accounts		Employer (See Instructions) Cigna Healthcare
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Sharon <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) VP, National Accounts		Employer (See Instructions) Cigna Healthcare
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Sharon <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP, National Accounts		Employer (See Instructions) Cigna Healthcare
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Sharon <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP, National Accounts		Employer (See Instructions) Cigna Healthcare

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/290 Rpt: 248/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Manager, Application Development		9 Employer (See Instructions) Reynolds and Reynolds
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Manager, Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager, Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager, Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/290 Rpt: 249/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/290 Rpt: 250/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Janice <hr/> 6 Contributor address; City; State; Zip Code Aubrey, TX 76227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Janice <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Janice <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Janice <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Janice <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/290 Rpt: 251/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) University of Texas at Austin
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/290 Rpt: 252/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) University of Texas at Austin
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/290 Rpt: 253/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/290 Rpt: 254/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/290 Rpt: 255/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/290 Rpt: 256/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/290 Rpt: 257/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/290 Rpt: 258/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/290 Rpt: 259/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/290 Rpt: 260/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/290 Rpt: 261/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) human resources		9 Employer (See Instructions) N/A
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/290 Rpt: 262/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) human resources		9 Employer (See Instructions) N/A
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/290 Rpt: 263/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice <hr/> 6 Contributor address; City; State; Zip Code Alameda, CA 94501	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Analysts		9 Employer (See Instructions) Internet Brands
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/290 Rpt: 264/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Alameda, CA 94501		
8 Principal occupation / Job title (See Instructions) Analysts		9 Employer (See Instructions) Internet Brands
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Alameda, CA 94501		
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Alameda, CA 94501		
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Alameda, CA 94501		
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Alice	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Alameda, CA 94501		
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Internet Brands

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/290 Rpt: 265/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Practice Manager		9 Employer (See Instructions) David E. Weber, O.D., P.C.
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber, O.D., P.C.
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber, O.D., P.C.
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber, O.D., P.C.
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber, O.D., P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/290 Rpt: 266/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Practice Manager		9 Employer (See Instructions) David E. Weber, O.D., P.C.
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/290 Rpt: 267/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Houston, TX 77084		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/290 Rpt: 268/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Houston, TX 77084		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/290 Rpt: 269/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Bay City, TX 77414		
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/290 Rpt: 270/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Bay City, TX 77414		
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions) Self
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/290 Rpt: 271/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> 6 Contributor address; City; State; Zip Code Bay City, TX 77414	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/290 Rpt: 272/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Fort Worth, TX 76112		
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/290 Rpt: 273/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76112	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) retired
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/290 Rpt: 274/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76112	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) retired
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Barry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/290 Rpt: 275/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Washington, DC 20001		
8 Principal occupation / Job title (See Instructions) Business process outsourcing		9 Employer (See Instructions) Practice Partners LLC
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/290 Rpt: 276/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Business process outsourcing		9 Employer (See Instructions) Practice Partners LLC
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/290 Rpt: 277/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> 6 Contributor address; City; State; Zip Code Muldoon, TX 78949	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/290 Rpt: 278/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> 6 Contributor address; City; State; Zip Code Muldoon, TX 78949	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/290 Rpt: 279/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Muldoon, TX 78949		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womach, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Deigo, CA 92115		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rgp
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womach, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Deigo, CA 92115		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rgp
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womach, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Deigo, CA 92115		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rgp
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womach, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Deigo, CA 92115		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rgp

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/290 Rpt: 280/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/290 Rpt: 281/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/290 Rpt: 282/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/290 Rpt: 283/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Houston, TX 77025		
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/290 Rpt: 284/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Houston, TX 77025		
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/290 Rpt: 285/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/290 Rpt: 286/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code austin, TX 78757		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/290 Rpt: 287/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> 6 Contributor address; City; State; Zip Code austin, TX 78757	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/290 Rpt: 288/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> 6 Contributor address; City; State; Zip Code austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy <hr/> Contributor address; City; State; Zip Code phila, PA 19103	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy <hr/> Contributor address; City; State; Zip Code phila, PA 19103	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/290 Rpt: 289/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Richardson, TX 75081		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/290 Rpt: 290/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	7 Amount of Contribution (\$) \$0.50
6 Contributor address; City; State; Zip Code Richardson, TX 75081		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/290 Rpt: 291/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/290 Rpt: 292/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 11/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/290 Rpt: 293/303
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 294/303	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/05/2023	5 Payee name Every State Blue	
6 Amount (\$) \$227.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name Every State Blue	
Amount (\$) \$212.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2023	Payee name Every State Blue	
Amount (\$) \$196.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 295/303	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 10/04/2023	5 Payee name Every State Blue	
6 Amount (\$) \$194.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2023	Payee name Every State Blue	
Amount (\$) \$3.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Every State Blue	
Amount (\$) \$173.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 296/303	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094	
4 Date 12/05/2023	5 Payee name Every State Blue		
6 Amount (\$) \$176.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/05/2023	5 Payee name Cooper, Carla	
6 Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 09/05/2023	Payee name Cooper, Carla	
Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 09/05/2023	Payee name Cooper, Carla	
Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/09/2023	Payee name Cooper, Carla	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Payee name Cooper, Carla	
6 Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/09/2023	Payee name Cooper, Carla	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 33 Old Dunhams Corner Way Edgartown, MA 02539	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/16/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 08/09/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Payee name Democracy Engine LLC	
6 Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 08/09/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 08/09/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 08/09/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Payee name Democracy Engine LLC	
6 Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 07/15/2023	Payee name Democracy Engine LLC	
Amount (\$) 12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Chargeback Fee
Date 09/05/2023	Payee name Garza, Maria	
Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 09/05/2023	Payee name Garza, Maria	
Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 09/05/2023	5 Payee name Garza, Maria	
6 Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 09/05/2023	Payee name Garza, Maria	
Amount (\$) 1.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/16/2023	Payee name Garza, Maria	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/09/2023	Payee name Garza, Maria	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 08/09/2023	5 Payee name Garza, Maria	
6 Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 08/09/2023	Payee name Garza, Maria	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Louisiana St Alton, TX 78573	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 07/15/2023	Payee name Oliver, Julie	
Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3500 Werner Ave Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 07/15/2023	Payee name Zucker, Jonathan	
Amount (\$) 2.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/7 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 07/15/2023	5 Payee name Zucker, Jonathan	
6 Amount (\$) 5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund
Date 07/15/2023	Payee name Zucker, Jonathan	
Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contribution Refund	(b) Description (See instructions regarding type of information required.) Contribution Refund