

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00053715	2 Total pages filed: 137
3 COMMITTEE NAME Annie's List		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 303277 Austin, TX 78703		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Piper NICKNAME LAST Stege Nelson	MI SUFFIX	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave. Austin, TX 78705		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave. Austin, TX 78705		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (202) 812-0554		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10/29/2023 12/31/2023		
11 ELECTION	ELECTION DATE Month Day Year 03/05/2024	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Annie's List	13 Filer ID (Ethics Commission Filers) 00053715
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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)	\$ 240,447.54
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,530.11
	4. TOTAL POLITICAL EXPENDITURES	\$ 163,620.05
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 354,532.26
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.

Piper Stege Nelson

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Annie's List		18 Filer ID (Ethics Commission Filers) 00053715
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 236,087.97
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 4,359.57
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	\$ 150,027.96
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 13,592.09
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 187,154.81

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/101 Rpt: 4/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code New Braunfels, TX 78130-7960	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130-7960	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Julia	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Coppell, TX 75019-2713	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Stacy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78703-4157	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Stacy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78703-4157	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/101 Rpt: 5/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Monika <hr/> 6 Contributor address; City; State; Zip Code Mabank, TX 75156-7236	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almeter, Stephanie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-5832	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045-8206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyson Martinez, Alyson <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045-8206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Porter W Jr <hr/> Contributor address; City; State; Zip Code Miami, FL 33129-2423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/101 Rpt: 6/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036-0166	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Development Coordinator		9 Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036-0166	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Development Coordinator		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036-0166	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Development Coordinator		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appling, Linda <hr/> Contributor address; City; State; Zip Code Lansing, MI 48911-1917	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-4613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/101 Rpt: 7/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-4613	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Askari, Ashley <hr/> Contributor address; City; State; Zip Code Waco, TX 76706-1020	Amount of Contribution (\$) \$51.83
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Ann <hr/> Contributor address; City; State; Zip Code Oaklyn, NJ 08107-1922	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Ann <hr/> Contributor address; City; State; Zip Code Oaklyn, NJ 08107-1922	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-3520	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions) Non Profit Professional		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/101 Rpt: 8/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, John	7 Amount of Contribution (\$) \$10.53
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216-3520	
8 Principal occupation / Job title (See Instructions) Non Profit Professional		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, John	Amount of Contribution (\$) \$10.53
	Contributor address; City; State; Zip Code San Antonio, TX 78216-3520	
Principal occupation / Job title (See Instructions) Non Profit Professional		Employer (See Instructions)
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Leigh Christine	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75205-1028	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baireuther, Kathleen	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78702-4495	
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Andy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dallas, TX 75287-6312	
Principal occupation / Job title (See Instructions) Regional Administrator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banister, Simin	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77019-2509		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banister, Simin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77019-2509		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barzelay, Susan	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Colleyville, TX 76034-4256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barzelay, Susan	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Colleyville, TX 76034-4256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barzelay, Susan	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Colleyville, TX 76034-4256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/101 Rpt: 10/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, Lydia Nan <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76006-4003	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, nancy Cozette <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006-4003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, nancy Cozette <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006-4003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaver, Becky <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6200	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaver, Becky <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6200	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/101 Rpt: 11/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Melissa <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-5271	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Melissa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-5271	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code Laredo, TX 78040-2504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code Laredo, TX 78040-2504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Tannya <hr/> Contributor address; City; State; Zip Code Laredo, TX 78040-2504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/101 Rpt: 12/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bermea, Terry	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Mission, TX 78572-1525		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Oliver	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78741-1167		
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertrand, Karri	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Richardson, TX 75081-5208		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birabil, Lorraine Burata	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75227-2707		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Sunset Valley, TX 78745-2638		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/101 Rpt: 13/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary <hr/> 6 Contributor address; City; State; Zip Code Sunset Valley, TX 78745-2638	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tre' And Lauren <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-3030	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Deborah <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045-5016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-8134	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-8134	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/101 Rpt: 14/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Robert <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-8134	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-8134	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-4236	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blueford-Daniels, Kathy <hr/> Contributor address; City; State; Zip Code Houston, TX 77026-7602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolander, Jessica <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1649	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/101 Rpt: 15/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bragalone, Mickie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-2919	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braunagel-Brown, Mary A. (Dr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78736-3319	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braunagel-Brown, Mary A. (Dr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78736-3319	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bray, Elizabeth <hr/> Contributor address; City; State; Zip Code Rollingwood, TX 78746-5943	Amount of Contribution (\$) \$258.32
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bray, Elizabeth <hr/> Contributor address; City; State; Zip Code Rollingwood, TX 78746-5943	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/101 Rpt: 16/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bray, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Rollingwood, TX 78746-5943	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bray, Elizabeth <hr/> Contributor address; City; State; Zip Code Rollingwood, TX 78746-5943	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Angela <hr/> Contributor address; City; State; Zip Code Denton, TX 76207-1288	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Angela <hr/> Contributor address; City; State; Zip Code Denton, TX 76207-1288	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Royce <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-4587	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/101 Rpt: 17/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Royce	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Austin, TX 78702-4587	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Royce	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78702-4587	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Becky Wolfson	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75209-5522	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budd, Russell W.	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204-2632	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burlage, Rachel	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Denton, TX 76210-8054	
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/101 Rpt: 18/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burlage, Rachel <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76210-8054	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Policy manager		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burlage, Rachel <hr/> Contributor address; City; State; Zip Code Denton, TX 76210-8054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Policy manager		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cade, Joanna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-2227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carafiol, Robyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244-7626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Thomas <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245-3521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/101 Rpt: 19/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary Dorsey <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-2807	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) psychotherapist		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassell, Jennifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-7351	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Solution advisor		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-3011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Perla <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-3011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Deputy Administrator		Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cemo, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1531	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/101 Rpt: 20/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melinda <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-6567	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaussee, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235-1611	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaussee, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235-1611	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-2345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-2345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/101 Rpt: 21/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiarito, Bebe	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Portland, OR 97231-2600		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiarito, Bebe	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97231-2600		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiarito, Bebe	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97231-2600		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76109-2049		
Principal occupation / Job title (See Instructions) Certified Academic Language Therapist		Employer (See Instructions)
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76109-2049		
Principal occupation / Job title (See Instructions) Certified Academic Language Therapist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/101 Rpt: 22/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Melinda	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77227-2337	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Melinda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77227-2337	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Roger	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Bellingham, WA 98225-6213	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Roger	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Bellingham, WA 98225-6213	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clement, Alison	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75204-1094	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/101 Rpt: 23/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Paul <hr/> 6 Contributor address; City; State; Zip Code Belmont, MA 02478-2836	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Christina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-2239	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Marie <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-5287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Sheryl <hr/> Contributor address; City; State; Zip Code Austin, TX 78722-1121	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) State Representative - House District 46		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Kara <hr/> Contributor address; City; State; Zip Code Spring, TX 77380-3945	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/101 Rpt: 24/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Leilani <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97201-3371	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		9 Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Leilani <hr/> Contributor address; City; State; Zip Code Portland, OR 97201-3371	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Quality Analytic Reporting Specialist		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Marta <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-3324	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Kathy <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217-4025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/101 Rpt: 25/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78217-4025	
8 Principal occupation / Job title (See Instructions) Nurse practitioner		9 Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy	Amount of Contribution (\$) \$26.01
	Contributor address; City; State; Zip Code San Antonio, TX 78217-4025	
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217-4025	
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217-4025	
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bellingham, WA 98229-2347	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/101 Rpt: 26/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson Thompson, Roslyn	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Dallas, TX 75225-1803		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeHart, Dalton	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77027-5343		
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean-Jones, Lesley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78751-3009		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dell, Marci	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78703-5097		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/101 Rpt: 27/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dell, Marci <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703-5097	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591-7000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591-7000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diffley, Lisa <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodds, Jean <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034-3652	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/101 Rpt: 28/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Carol Crabtree	7 Amount of Contribution (\$) \$2,581.45
	6 Contributor address; City; State; Zip Code Dallas, TX 75214-3106	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drazner, Laurie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75225-7004	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drumm, Ann Drumm	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204-2660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Jaquelin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78759-8025	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Jaquelin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78759-8025	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/101 Rpt: 29/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffee, Lisa Greenwood <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-2341	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Kaye <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253-5895	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunning, Sally Hawley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutton, Diana C. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-3942	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney retired		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eason, Patty Schilling <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626-7021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/101 Rpt: 30/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott-Smart, Patricia <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79605-4916	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott-Smart, Patricia <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605-4916	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Erica <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-9448	Amount of Contribution (\$) \$20.85
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elting, Kimberley Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-1915	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embrey, Lauren <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-2246	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate Management		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/101 Rpt: 31/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epner, Shannon	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Allen, TX 75013-3624	
8 Principal occupation / Job title (See Instructions) Advocacy		9 Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Quincy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78703-5160	
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Quincy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78703-5160	
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Teri	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75206-5625	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobar, Analysse	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Washington, DC 20002-7373	
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/101 Rpt: 32/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobar, Analysse <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20002-7373	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) White house liaison		9 Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esherick, Lisa <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94703-1904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3540	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE <hr/> Contributor address; City; State; Zip Code Houston, TX 77265-6717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair and Square Texas PAC <hr/> Contributor address; City; State; Zip Code Irving, TX 75063-8584	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/101 Rpt: 33/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falk, Jen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-1847	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Assistant District Attorney		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fargo, Helen <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581-5262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Heather <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010-3503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Heather <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010-3503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Jennifer C <hr/> Contributor address; City; State; Zip Code Sunnyvale, TX 75182-3252	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/101 Rpt: 34/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farquhar, John	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Plantation, FL 33317-3331		
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Gail	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Marcos, TX 78666-3490		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fasken, Andy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Paris, TX 75462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feronti, Rebecca	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78758-2569		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/101 Rpt: 35/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Lauren <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-3561	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mary <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Susan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-4911	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/101 Rpt: 36/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Jasmin <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75224-1053	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Marion <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5503	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Theresa <hr/> Contributor address; City; State; Zip Code Addison, TX 75001-6801	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Founder & President		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7103	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer D. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7103	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/101 Rpt: 37/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fossler, Kerry <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602-2135	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Delaina <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-4920	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-3812	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-3812	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023-4168	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/101 Rpt: 38/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowles, Nicole <hr/> 6 Contributor address; City; State; Zip Code Helotes, TX 78023-4168	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-2236	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-2236	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Nancy Elizabeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-6721	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Froemming, Maria <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-7333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Deputy Campaign Mge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/101 Rpt: 39/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Alexandra	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Austin, TX 78731-5206	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Alexandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78731-5206	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Alexandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78731-5206	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Martha	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Coppell, TX 75019-5820	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Martha	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Coppell, TX 75019-5820	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/101 Rpt: 40/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Danna 6 Contributor address; City; State; Zip Code Amarillo, TX 79110-1635	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Donor Services		9 Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Danna Contributor address; City; State; Zip Code Amarillo, TX 79110-1635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Danna Contributor address; City; State; Zip Code Amarillo, TX 79110-1635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Dennise Contributor address; City; State; Zip Code Dallas, TX 75214-4929	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gearing, Charles Contributor address; City; State; Zip Code Dallas, TX 75228-4142	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/101 Rpt: 41/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gearing, Rachael <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75228-4142	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gendason, Melissa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2855	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Fundraiser		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Karen Ostrum <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2622	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Financial consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/101 Rpt: 42/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerson, Emily <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22303-2004	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giddings, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-6658	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Al <hr/> Contributor address; City; State; Zip Code Austin, TX 78763-0360	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Al <hr/> Contributor address; City; State; Zip Code Austin, TX 78763-0360	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Carrie <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-5052	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/101 Rpt: 43/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginsberg, Elizabeth Ginsberg <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-3132	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-5112	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-5112	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/101 Rpt: 44/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenfield, Stuart	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78757-6811		
8 Principal occupation / Job title (See Instructions) Lecturer		9 Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenfield, Stuart	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78757-6811		
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Anne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75208-5003		
Principal occupation / Job title (See Instructions) Vp		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haley, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78749-1277		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halko, Gabrielle	Amount of Contribution (\$) \$36.34
Contributor address; City; State; Zip Code Española, NM 87532-3498		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/101 Rpt: 45/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, John 6 Contributor address; City; State; Zip Code Austin, TX 78750-1538	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, John Contributor address; City; State; Zip Code Austin, TX 78750-1538	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Linda Contributor address; City; State; Zip Code Austin, TX 78759-3968	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Linda Contributor address; City; State; Zip Code Austin, TX 78759-3968	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanks, Kendyl Contributor address; City; State; Zip Code Austin, TX 78704-3624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/101 Rpt: 46/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanks, Kendyl <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-3624	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Lis <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-2028	Amount of Contribution (\$) \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Lis <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-2028	Amount of Contribution (\$) \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes McMahon, Shellie <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-3260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, William <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840-2414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/101 Rpt: 47/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedrick, Marty <hr/> 6 Contributor address; City; State; Zip Code Benbrook, TX 76126-4249	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Janice <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244-7258	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, Shirley <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-5103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Abigail <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7251	Amount of Contribution (\$) \$258.32
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hepper, Vernon <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34237-3520	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/101 Rpt: 48/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Cassandra	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Farmers Branch, TX 75244-3821	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Laura	Amount of Contribution (\$) \$2,581.45
	Contributor address; City; State; Zip Code Austin, TX 78730-4214	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Laura	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78730-4214	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez-Erbeyi, Laura	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Garland, TX 75041-3011	
Principal occupation / Job title (See Instructions) Public Affairs		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernholm, Cameron	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75223-1124	
Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/101 Rpt: 49/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernholm, Cameron <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75223-1124	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Chief Philanthropy Officer		9 Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himelfarb, Regina C <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4246	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Gina Inez (Rep.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-0002	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Adam <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-4218	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Adam <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-4218	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/101 Rpt: 50/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Rachel <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727-6368	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Marketing Manager		9 Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Lesley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-4625	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Cathy <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-8578	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Cathy <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-8578	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holzer, Jean <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551-1745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/101 Rpt: 51/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holzer, Jean <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77551-1745	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) systems & data analyst		9 Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-4216	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Elaine <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-3663	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Elaine <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-3663	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Legal marketing		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/101 Rpt: 52/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Amy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-5048	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Legal marketing		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5048	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Legal marketing		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Legal marketing		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JAMES <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-1357	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jabara, Jenna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-2532	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/101 Rpt: 53/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Dena <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-5405	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Nonprofit		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrah, Hind <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072-4023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jatko, Samuel <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-3510	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson-Blalock, Jennifer <hr/> Contributor address; City; State; Zip Code New York, NY 10001-6261	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson-Blalock, Jennifer <hr/> Contributor address; City; State; Zip Code New York, NY 10001-6261	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/101 Rpt: 54/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juarez, Lorene M.	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Hollywood, FL 33024-8732	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77061-3831	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77061-3831	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77061-3831	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Austin, TX 78702-5313	
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/101 Rpt: 55/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702-5313	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Program coordinator		9 Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-5313	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karny, Lori <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90048-5126	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Krisi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-3289	Amount of Contribution (\$) \$5,162.70
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearney, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-8511	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/101 Rpt: 56/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearney, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-8511	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenton, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78239-3097	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-0720	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-0720	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Pamela <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626-2362	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/101 Rpt: 57/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Betsy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-3130	7 Amount of Contribution (\$) \$1,250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohnert, Peggie <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-5421	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozmetsky, Cynthia H <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-3200	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutac, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-3553	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2412	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) singer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/101 Rpt: 58/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-2412	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) singer		9 Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) singer		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2412	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) singer		Employer (See Instructions)
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2412	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) singer		Employer (See Instructions)
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) singer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/101 Rpt: 59/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIDO, RITA	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code Houston, TX 77002-1741		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIDO, RITA	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Houston, TX 77002-1741		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIDO, RITA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77002-1741		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaValley, William	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78759-6168		
Principal occupation / Job title (See Instructions) Medical Doctor		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacher, Kerri	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75209-3118		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/101 Rpt: 60/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacher, Kerri	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75209-3118		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Ruth	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code Melbourne, FL 32940-6815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Ruth	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code Melbourne, FL 32940-6815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lattimore, Mary E	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Fort Worth, TX 76102-4740		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Mai	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sunnyvale, CA 94087-5202		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/101 Rpt: 61/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Mai	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Sunnyvale, CA 94087-5202	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Michael	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Jose, CA 95120-2232	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leff, Debra S	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78756-3525	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leff, Debra S	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78756-3525	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, byron	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Katy, TX 77449-7504	
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/101 Rpt: 62/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lerner, Elizabeth Arend <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-5424	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-4001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-4001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lew, Virginia <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-3827	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ligon, Katharine <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-1633	Amount of Contribution (\$) \$142.40
Principal occupation / Job title (See Instructions) Policy analyst		Employer (See Instructions)

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SCHEDULE A1

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsley, Ruth <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-3531	7 Amount of Contribution (\$) \$258.32
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Mauri <hr/> Contributor address; City; State; Zip Code Garland, TX 75042-4619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Financial Manager		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Sandra S. <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-8001	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Sandra S. <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-8001	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacLean, Leslie C <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-1238	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/101 Rpt: 64/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Judy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216-7708	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Judy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-7708	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marissa	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Plano, TX 75075-6413	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Rachel	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107-4306	
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00506832) Marc Veasey for Congress	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76105-0084	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/101 Rpt: 65/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marmion, Laura	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Georgetown, TX 78628-9512	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marmion, Laura	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628-9512	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquez, Leonor	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75287-6200	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pinole, CA 94564-1220	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pinole, CA 94564-1220	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/101 Rpt: 66/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen <hr/> 6 Contributor address; City; State; Zip Code Pinole, CA 94564-1220	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Pat <hr/> Contributor address; City; State; Zip Code Austin, TX 78722-1227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Spencer <hr/> Contributor address; City; State; Zip Code Houston, TX 77084-4312	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Spencer <hr/> Contributor address; City; State; Zip Code Houston, TX 77084-4312	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Donna <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478-1947	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Donna <hr/> 6 Contributor address; City; State; Zip Code Belmont, MA 02478-1947	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Management consultant		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mc Ewen, Jack <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-4462	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433-3778	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433-3778	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Cathleen <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382-9402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/101 Rpt: 68/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Rosa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-3782	7 Amount of Contribution (\$) \$25,000.00
8 Principal occupation / Job title (See Instructions) Investment Manager		9 Employer (See Instructions)
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Patrick <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95818-4106	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Forester		Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Patrick <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95818-4106	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Forester		Employer (See Instructions)
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5938	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5938	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/101 Rpt: 69/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIlheran, Sarah <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78734-1525	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) physical therapist		9 Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code Austin, TX 78734-1525	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) physical therapist		Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinley, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-4718	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinley, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-4718	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinnon, Lauren <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-4435	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLornan, Sarah 6 Contributor address; City; State; Zip Code San Antonio, TX 78212-1772	7 Amount of Contribution (\$) \$103.45
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckellar, Shirley Contributor address; City; State; Zip Code Tyler, TX 75702-1452	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle Contributor address; City; State; Zip Code Austin, TX 78759-4723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle Contributor address; City; State; Zip Code Austin, TX 78759-4723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle Contributor address; City; State; Zip Code Austin, TX 78759-4723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Austin, TX 78759-4723	
8 Principal occupation / Job title (See Instructions) Assistant GC		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78759-4723	
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mewborne, Jessica	Amount of Contribution (\$) \$51.83
	Contributor address; City; State; Zip Code San Antonio, TX 78217-3424	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patricia L	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205-3226	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monahan, Kathleen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78705-2429	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monahan, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78705-2429	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Celina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-5185	Amount of Contribution (\$) \$4,850.93
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Regina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5513	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Erin Marie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-1009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Admin		Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More, Alyssa <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11222-7016	Amount of Contribution (\$) \$51.83
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mukerji, Shampa <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006-2315	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neil, JoDee <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-3803	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Piper Stege <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008-7105	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevill, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78741-2511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Anna <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8162	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Cloud Engineer		Employer (See Instructions)

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2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Cam <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Shannon <hr/> Contributor address; City; State; Zip Code Austin, TX 78735-6605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Shannon <hr/> Contributor address; City; State; Zip Code Austin, TX 78735-6605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyland, Chad <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-6510	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2147	Amount of Contribution (\$) \$258.32
Principal occupation / Job title (See Instructions) publishing		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/101 Rpt: 75/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-2147	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) publishing		9 Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozarow, Meaders Moore <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-3311	Amount of Contribution (\$) \$1,032.70
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacelli, Richard <hr/> Contributor address; City; State; Zip Code Northbridge, MA 01534-1252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-7871	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Mary Anna <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-7871	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/101 Rpt: 76/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Pamela <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702-1805	7 Amount of Contribution (\$) \$65,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelayo, Yvonne M. <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258-1610	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelayo, Yvonne M. <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258-1610	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelli, Priscilla <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235-0186	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70117-5727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/101 Rpt: 77/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
8 Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Marlene	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Gainesville, TX 76240-5338		
Principal occupation / Job title (See Instructions) Higher education		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Stephen	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Austin, TX 78750-8135		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pique, Lynn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Redwood City, CA 94063-1036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polito, Catherine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78759-5001		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/101 Rpt: 78/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polito, Catherine <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759-5001	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portillo, Angelica <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-5801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poyser, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWAN, PATRICIA <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-3801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWAN, PATRICIA <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-3801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/101 Rpt: 79/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rassadi, Yasmin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-6123	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions)
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rassadi, Yasmin <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-6123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayzor, Selwyn A <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2040	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Readinger, Dona <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76114-1154	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redford, Danna <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-6367	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/101 Rpt: 80/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Sandra Lemcke <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006-6166	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Sandra Lemcke <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-6166	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynoso, Beatriz <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552-2261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Design Consulting		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynoso, Beatriz <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552-2261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Design Consulting		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ribnick-Kleiman, Amelia H <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4835	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Fundraiser Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/101 Rpt: 81/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ribnick-Kleiman, Amelia H <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-4835	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Fundraiser Attorney		9 Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Joanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8202	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Joanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8202	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rix, Allison <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-4424	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Erika <hr/> Contributor address; City; State; Zip Code Glendale, CA 91205-3564	Amount of Contribution (\$) \$20.85
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/101 Rpt: 82/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Erika <hr/> 6 Contributor address; City; State; Zip Code Glendale, CA 91205-3564	7 Amount of Contribution (\$) \$20.85
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Andrea Ray <hr/> Contributor address; City; State; Zip Code Crozet, VA 22932-3140	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jacqueline <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78202-1950	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robeson, Anita <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-1342	Amount of Contribution (\$) \$2,581.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Jean <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-2058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/101 Rpt: 83/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Jean <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-2058	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-4332	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-4332	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/101 Rpt: 84/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosales, Denise <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-9180	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Barbara Elaine <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Charles Terry <hr/> Contributor address; City; State; Zip Code Houston, TX 77268	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Real estate mgmt		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Velia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228-1709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/101 Rpt: 85/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samandari, Sudy	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77030-1825		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy	Amount of Contribution (\$) \$2,581.45
Contributor address; City; State; Zip Code Dallas, TX 75229-6609		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarath, Patrice	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757-3036		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarath, Patrice	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757-3036		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarath, Patrice	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757-3036		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/101 Rpt: 86/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saucer, Ann 6 Contributor address; City; State; Zip Code Dallas, TX 75214-2489	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sawicky, Jackie Contributor address; City; State; Zip Code Corsicana, TX 75109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ad operations		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sawyer, Robin Contributor address; City; State; Zip Code Mclean, VA 22102-5864	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Programs Manager		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Kathy Contributor address; City; State; Zip Code Dallas, TX 75254-2709	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seldin, Ellen Contributor address; City; State; Zip Code Dallas, TX 75230-2437	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/101 Rpt: 87/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/13/2023	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 75230-2437	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpe, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-2833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpe, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-2833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) planning facilitator		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code Keller, TX 76248-5223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Caroline <hr/> Contributor address; City; State; Zip Code Keller, TX 76248-5223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/101 Rpt: 88/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Caroline	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Keller, TX 76248-5223		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Keller, TX 76248-5223		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickles, Donna	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Saint Jo, TX 76265		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon Greenstone Panatier, PC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Dallas, TX 75270		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skidmore, Danielle	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/101 Rpt: 89/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skidmore, Danielle	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Austin, TX 78701-4271		
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skidmore, Danielle	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skidmore, Danielle	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78701-4271		
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Lawson, Bridgette	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Richmond, TX 77469-6355		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Lawson, Bridgette	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Richmond, TX 77469-6355		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/101 Rpt: 90/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spicer, Kathy	7 Amount of Contribution (\$) \$2,581.45
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116-4612	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spicer, Kathy	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116-4612	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spicer, Kathy	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116-4612	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiegel, Melanie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75225-3325	
Principal occupation / Job title (See Instructions) Creative Brand ConduLtsnt		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Mia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Addison, TX 75001-4432	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/101 Rpt: 91/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Laurel <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2941	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabor, Catherine L <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-3314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabor, Catherine L <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-3314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temple, Ellen <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901-7346	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temple, Ellen <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901-7346	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/101 Rpt: 92/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thibodeaux, Joyce <hr/> 6 Contributor address; City; State; Zip Code Houma, LA 70360-5932	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tipping, Carolyn <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7527	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Dominique <hr/> Contributor address; City; State; Zip Code Dallas, TX 75249-3613	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Dominique <hr/> Contributor address; City; State; Zip Code Dallas, TX 75249-3613	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-6204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/101 Rpt: 93/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-6204	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trachtenberg, Brian <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-5443	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trachtenberg, Brian <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-5443	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Jennifer <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76114-1786	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Jennifer <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76114-1786	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/101 Rpt: 94/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallot, Colette <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-7905	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veliz, MaryEllen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-7316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veliz, MaryEllen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-7316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code Valdez, AK 99686-1503	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code Valdez, AK 99686-1503	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/101 Rpt: 95/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Leslie	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Houston, TX 77096-4005	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace Bronstein, Dale	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76112-5425	
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Kandace	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richardson, TX 75081-3736	
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Kimberlee	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Corsicana, TX 75110-6725	
Principal occupation / Job title (See Instructions) Office manager		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardell, Karen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76109-2624	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/101 Rpt: 96/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Richard <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76015-2812	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SW Engineer		9 Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Richard <hr/> Contributor address; City; State; Zip Code Arlington, TX 76015-2812	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Richard <hr/> Contributor address; City; State; Zip Code Arlington, TX 76015-2812	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SW Engineer		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Ingrid <hr/> Contributor address; City; State; Zip Code Dallas, TX 75270-2102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Presiding Judge		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Kristen <hr/> Contributor address; City; State; Zip Code Greenville, TX 75401-5113	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/101 Rpt: 97/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Doris <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76110-1741	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		9 Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Doris <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110-1741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, David <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90403-4668	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-2799	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions)
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welsh, Amber <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-1505	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/101 Rpt: 98/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Marsha	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76108-9727		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Lynn	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78704-3101		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Lynn	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78704-3101		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Lynn	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78704-3101		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widoff, Mark	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lewes, DE 19958-1764		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/101 Rpt: 99/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Paul	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201-3920	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisdom, Lynn	Amount of Contribution (\$) \$258.32
	Contributor address; City; State; Zip Code Dallas, TX 75219-1585	
Principal occupation / Job title (See Instructions) Advertising Sales		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcock, David	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code College Station, TX 77840-7217	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods Martin, Patsy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201-1533	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Kennon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78704-2635	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/101 Rpt: 100/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Kennon <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-2635	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Kennon <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2635	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wrather, Lauren <hr/> Contributor address; City; State; Zip Code Austin, TX 78728-1416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wrather, Lauren <hr/> Contributor address; City; State; Zip Code Austin, TX 78728-1416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-1415	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/101 Rpt: 101/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Carlecia D. <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018-1415	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynton, Jasmine <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-5907	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Bob <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Bob <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoss, Jerri <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-1601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/101 Rpt: 102/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon K <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-5860	7 Amount of Contribution (\$) \$2,581.45
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon K <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-5860	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavala, Jessica <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234-7219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Riva, Isabel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2217	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Riva, Isabel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2217	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/101 Rpt: 103/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Riva, Isabel <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259-2217	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Riva, Isabel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2217	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) dewar, claire <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5615	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) schnur, tatiana <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-4203	Amount of Contribution (\$) \$20.85
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) van Gelder, Diane <hr/> Contributor address; City; State; Zip Code Watauga, TX 76148-3225	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/101 Rpt: 104/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) van Voorhis, Jill <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-1082	7 Amount of Contribution (\$) \$1,032.70
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 105/137	
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/02/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tre' And Lauren	8 Amount of contribution (\$) \$4,359.57	9 In-kind contribution description Catering for Dallas Committee Reception
	7 Contributor address; City; State; Zip Code Dallas, TX 75208-3030	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: 1/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 10/29/2023	5 Payee name ActBlue	
6 Amount (\$) \$22.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2023	Payee name ActBlue	
Amount (\$) \$30.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2023	Payee name ActBlue	
Amount (\$) \$81.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 11/19/2023	5 Payee name ActBlue
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6 Amount (\$) \$35.96	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2023	Payee name ActBlue
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Amount (\$) \$36.29	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2023	Payee name ActBlue
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Amount (\$) \$977.28	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031
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Expenditure from corporate funds

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/10/2023	5 Payee name ActBlue	
6 Amount (\$) \$243.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2023	Payee name ActBlue	
Amount (\$) \$24.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/24/2023	Payee name ActBlue	
Amount (\$) \$42.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 12/31/2023	5 Payee name ActBlue
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6 Amount (\$) \$66.04	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/19/2023	Payee name Annie's List Training and Engagement Fund
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Amount (\$) \$42,000.00	Payee address; City; State; Zip Code PO Box 699 Austin, TX 78767-0699
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll support
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2023	Payee name Blue Scout Digital
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Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067
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Expenditure from corporate funds

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 12/15/2023	5 Payee name Blue Scout Digital
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital consulting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/20/2023	Payee name Bumper Active
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5925 Burnet Rd Austin, TX 78757-3224
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sales merchandise
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2023	Payee name Bumper Active
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Amount (\$) \$1,339.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5925 Burnet Rd Austin, TX 78757-3224
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sales merchandise
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 12/15/2023	5 Payee name Bumper Active
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6 Amount (\$) \$617.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5925 Burnet Rd Austin, TX 78757-3224
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sales merchandise
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2023	Payee name CVS
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Amount (\$) \$365.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3012 Mockingbird Ln Dallas, TX 75205-2323
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing of event photos
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2023	Payee name Figueroa, Iliana
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Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 12/14/2023	5 Payee name Figueroa, Iliana
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6 Amount (\$) \$461.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2023	Payee name Flagship Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7926 Broadway Apt 707 San Antonio, TX 78209-2613
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography & graphic design
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Gomez, Cristina
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Amount (\$) \$461.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 300146 Austin, TX 78703-0003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense holiday bonus
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/14/2023	5 Payee name Gusto	
6 Amount (\$) \$80.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107-4345	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll liabilities
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name Gusto	
Amount (\$) \$332.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107-4345	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll liabilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Gusto	
Amount (\$) \$43.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107-4345	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll liabilities
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: 9/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/29/2023	5 Payee name Herospace Digital	
6 Amount (\$) \$2,565.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1840 W Mulberry Ave San Antonio, TX 78201-4928	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Hilton Garden Inn	
Amount (\$) \$268.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Pacific Ave Dallas, TX 75201-3602	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Intuit	
Amount (\$) \$95.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software subscription fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/21/2023	5 Payee name Intuit	
6 Amount (\$) \$95.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software subscription fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Kalbfleisch, Jacob S	
Amount (\$) \$364.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name Kalbfleisch, Jacob S	
Amount (\$) \$255.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/14/2023	5 Payee name Kalbfleisch, Jacob S	
6 Amount (\$) \$461.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Lyle, Sharon E	
Amount (\$) \$8,750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4333 Travis St Dallas, TX 75205-4451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event planning
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Montemayor Britton Bender PC	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2525 Wallingwood Dr Ste 200 Austin, TX 78746-6937	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 12/29/2023	5 Payee name Montemayor Britton Bender PC
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6 Amount (\$) \$450.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2525 Wallingwood Dr Ste 200 Austin, TX 78746-6937
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2023	Payee name NGP Van Inc.
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Amount (\$) \$2,053.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name NGP Van Inc.
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Amount (\$) \$2,053.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/14/2023	5 Payee name Padilla, Graciela	
6 Amount (\$) \$461.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/02/2023	Candidate/Officeholder name Paragon	
Amount (\$) \$1,140.05 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 11/02/2023	Candidate/Officeholder name Paragon	
Amount (\$) \$1,140.05 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/04/2023	Candidate/Officeholder name Paragon	
Amount (\$) \$3,253.19 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 12/04/2023	Candidate/Officeholder name Paragon	
Amount (\$) \$3,253.19 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 11/16/2023	5 Payee name Prosperity Bank
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6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 660525 Dallas, TX 75266-0525
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2023	Payee name Prosperity Bank
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Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525 Dallas, TX 75266-0525
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2023	Payee name Prosperity Bank
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Amount (\$) \$3,985.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 660525 Dallas, TX 75266-0525
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 11/29/2023	5 Payee name Prosperity Bank
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6 Amount (\$) \$10,327.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 660525 Dallas, TX 75266-0525
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2023	Payee name Ramon, Ana
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Amount (\$) \$351.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage reimbursement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Ramon, Ana
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Amount (\$) \$461.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 303277 Austin, TX 78703-0055
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 11/30/2023	5 Payee name Sheraton	
6 Amount (\$) \$39,202.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 165 Courtland St SE Atlanta, GA 30303-3212	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue expenses for event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Steady Hand PR	
Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1205 Upland Dr Austin, TX 78741-1167	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name Steady Hand PR	
Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1205 Upland Dr Austin, TX 78741-1167	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 Date 11/21/2023	5 Payee name Susan Harry Consulting
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6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703-0018
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/21/2023	Payee name Susan Harry Consulting
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Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703-0018
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2023	Payee name Texas Democratic Party
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Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761-5707
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership in the data council and access to voter file
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/04/2023	6 Payee name Boardable
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7 Amount (\$) \$149.25 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 6219 Guilford Ave Indianapolis, IN 46220-3090
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software subscription fee
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2023	Payee name CubeSmart
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Amount (\$) \$591.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 W 5th St Austin, TX 78703-5103
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/23/2023	6 Payee name CubeSmart
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7 Amount (\$) \$591.60	8 Payee address; City; State; Zip Code 1411 W 5th St Austin, TX 78703-5103
<input type="checkbox"/> Expenditure from corporate funds	

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name FedEx Office
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Amount (\$) \$204.59	Payee address; City; State; Zip Code 327 Congress Ave Ste 100 Austin, TX 78701-3691
<input type="checkbox"/> Expenditure from corporate funds	

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

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/08/2023	6 Payee name From You Flowers
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7 Amount (\$) \$86.58	8 Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for supporter
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/07/2023	Payee name From You Flowers
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Amount (\$) \$67.08	Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for supporter
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/07/2023	6 Payee name From You Flowers
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7 Amount (\$) \$67.08	8 Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for supporter
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/07/2023	Payee name From You Flowers
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Amount (\$) \$67.08	Payee address; City; State; Zip Code 143 Mill Rock Rd E Old Saybrook, CT 06475-4217
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for supporter
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/01/2023	6 Payee name Google
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7 Amount (\$) \$214.91	8 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name Google
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Amount (\$) \$72.42	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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Expenditure from corporate funds

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

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/01/2023	6 Payee name Google
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7 Amount (\$) \$214.91	8 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
<input type="checkbox"/> Expenditure from corporate funds	

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name Google
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Amount (\$) \$72.36	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
<input type="checkbox"/> Expenditure from corporate funds	

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

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/06/2023	6 Payee name Intuit
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7 Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software subscription fee
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name Intuit
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Amount (\$) \$213.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software subscription fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/09/2023	6 Payee name Le Colonial Texas
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7 Amount (\$) \$206.29 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 4444 Westheimer Rd Ste G140 Houston, TX 77027-4464
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor stewardship and cultivation
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/21/2023	Payee name Marsh McLennan Agency
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Amount (\$) \$3,642.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 848315 Dallas, TX 75284-8315
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/21/2023	6 Payee name Marsh McLennan Agency
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7 Amount (\$) \$127.49 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code PO Box 848315 Dallas, TX 75284-8315
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name NGP Van Inc.
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Amount (\$) \$26.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/01/2023	6 Payee name NGP Van Inc.
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7 Amount (\$) \$26.65 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software fee
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Priceline.com
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Amount (\$) \$131.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854-1631
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/09/2023	6 Payee name Quest Events
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7 Amount (\$) \$2,424.63 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 2591 Dallas Pkwy Ste 201 Frisco, TX 75034-8543
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event supplies
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name Sachet
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Amount (\$) \$616.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4270 Oak Lawn Ave Dallas, TX 75219-2312
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff retention activities
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/08/2023	6 Payee name Shag Carpet
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7 Amount (\$) \$1,764.75	8 Payee address; City; State; Zip Code 3184 Quebec St Dallas, TX 75247-6704
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Expenditure from corporate funds

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event supplies
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2023	Payee name Sheraton Dallas
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Amount (\$) \$78.35	Payee address; City; State; Zip Code 400 Olive St Dallas, TX 75201-4005
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Expenditure from corporate funds

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

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 12/02/2023	6 Payee name Sheraton Dallas
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7 Amount (\$) \$188.19 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 400 Olive St Dallas, TX 75201-4005
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2023	Payee name Sheraton Dallas
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Amount (\$) \$46.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Olive St Dallas, TX 75201-4005
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 14/14 Rpt:	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 988.46
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5 Date 11/13/2023	6 Payee name Zoom Video Communications
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7 Amount (\$) \$246.88	8 Payee address; City; State; Zip Code 2400 Allen St Dallas, TX 75204-2502
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virtual meeting software
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Zoom Video Communications
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Amount (\$) \$250.06	Payee address; City; State; Zip Code 2400 Allen St Dallas, TX 75204-2502
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virtual meeting software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 137/137
2 FILER NAME Annie's List		3 Filer ID (Ethics Commission Filers) 00053715
4 Date 12/22/2023	5 Name of person from whom amount is received IRS	8 Amount (\$) \$187,154.81
6 Address of person from whom amount is received; City; State; Zip Code Louisville, KY 40293		
7 Purpose for which amount is received tax credit		<input type="checkbox"/> Check if political contribution returned to filer