

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081913	2 Total pages filed: 416	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST James	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024
	NICKNAME	LAST Talarico	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 15207 Austin, TX 78761		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Susan	MI MI	
	NICKNAME	LAST Gezana	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2231 Margalene Way Austin, TX 78728		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 484-3528	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative District 50		12 OFFICE SOUGHT (if known) State Representative District 50	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Talarico, James (The Honorable) **14** Filer ID (Ethics Commission Filers)
00081913

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	133,387.63
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	74,842.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	260,965.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.

The Honorable James Talarico

Signature of Candidate or Officeholder

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 Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Talarico, James (The Honorable)		19 Filer ID (Ethics Commission Filers) 00081913
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 133,387.63
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 74,842.42
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/374 Rpt: 4/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 09/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSAPAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BARBARA <hr/> Contributor address; City; State; Zip Code Palestine, TX 75801	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaronson, Paula <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Retired
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abraham, Joel <hr/> Contributor address; City; State; Zip Code Leominster, MA 01453	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acevedo, Debora <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/374 Rpt: 5/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77084	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) Quest
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Martha <hr/> Contributor address; City; State; Zip Code Richmond, CA 94804	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adair, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) cpa		Employer (See Instructions) me
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adair, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) cpa		Employer (See Instructions) me
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Anne <hr/> Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) RadioShack Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/374 Rpt: 6/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eloise <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75961	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eloise <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eloise <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eloise <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eloise <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/374 Rpt: 7/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Roberta <hr/> 6 Contributor address; City; State; Zip Code Olympia, WA 98508	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Roberta <hr/> Contributor address; City; State; Zip Code Olympia, WA 98508	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Roberta <hr/> Contributor address; City; State; Zip Code Olympia, WA 98508	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Roy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Wanda Stout <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/374 Rpt: 8/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkinson, Glenda	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78756		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkinson, Glenda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, David	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78741		
Principal occupation / Job title (See Instructions) Austin Community College		Employer (See Instructions) Professor
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Kimo	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75228		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Richardson ISD
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Marjorie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Big Spring, TX 79720		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/374 Rpt: 9/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfieri, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78210	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Digital Media Consultant		9 Employer (See Instructions) Alfieri Digital LLC
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ali, Siraj <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) lunit
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alkire, Stephen <hr/> Contributor address; City; State; Zip Code Creede, CO 81130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Charmaine <hr/> Contributor address; City; State; Zip Code Westchester, IL 60154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Jeanine <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) ECOM Atlantic Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/374 Rpt: 10/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allensworth, Judith <hr/> 6 Contributor address; City; State; Zip Code Ellettsville, IN 47429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Customer Service/Office Mgr.		9 Employer (See Instructions) Communication Disorders Technology
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Shirley <hr/> Contributor address; City; State; Zip Code Lakewood, CO 80215	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allyn, Tammy <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allyn, Tammy <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alsup, Marion <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/374 Rpt: 11/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altizer, Margaret <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Michaela <hr/> Contributor address; City; State; Zip Code Hillsboro, TX 76645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hill County
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amador, Benito <hr/> Contributor address; City; State; Zip Code Seguin, TX 78156	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ancira Strategies <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Lars <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/374 Rpt: 12/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Lars	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Carrollton, TX 75007		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andries, Eva	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell-McCready, Rebecca	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Financial Examiner		Employer (See Instructions) Texas Department of Banking
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell-McCready, Rebecca	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Financial Examiner		Employer (See Instructions) Texas Department of Banking
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell-McCready, Rebecca	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Financial Examiner		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/374 Rpt: 13/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell-McCready, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Financial Examiner		9 Employer (See Instructions) Texas Department of Banking
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell-McCready, Rebecca <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Financial Examiner		Employer (See Instructions) Texas Department of Banking
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Reeser, Rose <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arday, David <hr/> Contributor address; City; State; Zip Code Laurel, MD 20723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardington, Amy <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/374 Rpt: 14/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Areno, Matthew <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Principal Engineer		9 Employer (See Instructions) Intel
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Areno, Matthew <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Engineer		Employer (See Instructions) Intel
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Areno, Matthew <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Engineer		Employer (See Instructions) Intel
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Areno, Matthew <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Engineer		Employer (See Instructions) Intel
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arias, Jonathan <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) HP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/374 Rpt: 15/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arias, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77377	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) HP
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Ray <hr/> Contributor address; City; State; Zip Code Tallahassee, FL 32310	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Seth <hr/> Contributor address; City; State; Zip Code Seattle, WA 98101	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Keith <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Keith <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/374 Rpt: 16/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashbaugh, Tom	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78727		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashbaugh, Tom	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78727		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashbaugh, Tom	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78727		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ausley, Robbie	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austgen, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sugar Land, TX 77479		
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: 14/374 Rpt: 17/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Jose <hr/> 6 Contributor address; City; State; Zip Code South Pasadena, CA 91030	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Physycian		9 Employer (See Instructions) SCPMG
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, Cliff <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, Cliff <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, MeLinda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/374 Rpt: 18/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avila, Juan <hr/> Contributor address; City; State; Zip Code Sun Valley, CA 91352	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) At-Risk Intervention Sp		Employer (See Instructions) Burbank Unified Schools
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Nancy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITZ, Sherry <hr/> Contributor address; City; State; Zip Code Larue, TX 75770	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Judy <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Mesquite ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/374 Rpt: 19/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babers, Bette <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babers, Bette <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baethge, Edwina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baethge, Edwina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baethge, Edwina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/374 Rpt: 20/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baeza, Denise <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79938	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) educator		9 Employer (See Instructions) Ysleta Independent School District
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Sylvia <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Caitlin <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) analyst		Employer (See Instructions) Apple
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Church Administrator		Employer (See Instructions) United Christian Church
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/374 Rpt: 21/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Audio producer		9 Employer (See Instructions) Self
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Audio producer		Employer (See Instructions) Self
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Audio producer		Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballon-Almanza, Connie <hr/> Contributor address; City; State; Zip Code Windcrest, TX 78239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Medical Writer		Employer (See Instructions) ProPharma
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballon-Almanza, Connie <hr/> Contributor address; City; State; Zip Code Windcrest, TX 78239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Medical Writer		Employer (See Instructions) ProPharma

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/374 Rpt: 22/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltzer, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banczak, Peggy <hr/> Contributor address; City; State; Zip Code Katy, TX 77493	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Hannah <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Hannah <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbini, Charlotte <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/374 Rpt: 23/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bareis, Margaret <hr/> 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barger, Jonathan <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Apple
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cindy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera, Michelle <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) Simmons Bank
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/374 Rpt: 24/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Paula <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartter, Beth <hr/> Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barum, Martin <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Reservations representative		Employer (See Instructions) American Airlines
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baskin, Bonita <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baskin, Bonnie <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/374 Rpt: 25/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Grant	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Banking		9 Employer (See Instructions) Usaa
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batterton, Jeanne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Budget processor		Employer (See Instructions) Cody Pools
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauermeister, Michael	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Contract Manager		Employer (See Instructions) NTT DATA SERVICES
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauermeister, Michael	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Contract Manager		Employer (See Instructions) NTT DATA SERVICES
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauhs, Darlene	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/374 Rpt: 26/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumgardner, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Oakbrook Terrace, IL 60181	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beall, James <hr/> Contributor address; City; State; Zip Code Rancho Santa Margarita, CA 92688	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) systems analyst		Employer (See Instructions) Pacific life
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaulieu, Jeffrey <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Verisk
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Joyce L. <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) TCU Extended Education
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckham, Jeanie <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/374 Rpt: 27/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Mary Jo <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) writer/editor		9 Employer (See Instructions) self employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beene, Mary Jo <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer/editor		Employer (See Instructions) self employed
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behr, Danielle <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Landscape Designer		Employer (See Instructions) Studio Pappaterra
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beisner, John <hr/> Contributor address; City; State; Zip Code Ames, IA 50010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Brenda <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/374 Rpt: 28/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Caroline	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76123		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Linda	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Paris, TX 75460		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellamy, Brad	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Nate Controls
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellamy, Brad	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Nate Controls
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellamy, Brad	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Nate Controls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/374 Rpt: 29/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellamy, Brad <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Nate Controls
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/374 Rpt: 30/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Michael <hr/> Contributor address; City; State; Zip Code Pensacola, FL 32534	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Sales Supervisor		Employer (See Instructions) PEPSI
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Terri <hr/> Contributor address; City; State; Zip Code Mission, TX 78573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Anne <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Here technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/374 Rpt: 31/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berasley, Ann <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Continuity Coordinator		9 Employer (See Instructions) Texas Medical Board
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berasley, Ann <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Continuity Coordinator		Employer (See Instructions) Texas Medical Board
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Robert <hr/> Contributor address; City; State; Zip Code Shoreline, WA 98155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Media producer		Employer (See Instructions) Shoreline Community College
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstein, Scott <hr/> Contributor address; City; State; Zip Code North Hollywood, CA 91601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstrom, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$10.00
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: 29/374 Rpt: 32/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstrom, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berk, Susan <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkowitz, Phyllis <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33498	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkowitz, Phyllis <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33498	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliner, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/374 Rpt: 33/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berthold, Michael <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) KISD
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Wolfram Research
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickle, Ricki <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Professional Life Therapy
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bircher, Nancy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Steve <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Seminary of the Southwest

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/374 Rpt: 34/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackson, Steve <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Landscape Design		9 Employer (See Instructions) Windy Point Garden Railroads
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackson, Steve <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Landscape Design		Employer (See Instructions) Windy Point Garden Railroads
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Harriet <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JournAlist		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazer, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazer, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired systems analyst		Employer (See Instructions) Teacher Retirement System

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/374 Rpt: 35/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blessinger, Yady <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Fort Bend ISD
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Shannyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Heb
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloemker, David <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Emerson
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloemker, David <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Emerson
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloemker, Laura <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Web content writer editor		Employer (See Instructions) TASB

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/374 Rpt: 36/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bode, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohnet, Julie <hr/> Contributor address; City; State; Zip Code Willits, CA 95490	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boice, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Patent Examiner		Employer (See Instructions) USPTO
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boitnott, Monique <hr/> Contributor address; City; State; Zip Code Niederwald, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Teacher retirement
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonaparte, Margaret <hr/> Contributor address; City; State; Zip Code Gardiner, NY 12525	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) calendar clerk		Employer (See Instructions) finkelstein & partners

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/374 Rpt: 37/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Cynthia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booth, Patsy <hr/> Contributor address; City; State; Zip Code Midwest City, OK 73130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borrego, Coleen <hr/> Contributor address; City; State; Zip Code Davis, CA 95618	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Mentor Teacher		Employer (See Instructions) Davis Waldorf School
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bower, Jeanne <hr/> Contributor address; City; State; Zip Code Carlisle, PA 17015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyles, Glyn <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/374 Rpt: 38/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Ellen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Cintra
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannen, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Self-employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannen, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/374 Rpt: 39/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branton, Amy <hr/> 6 Contributor address; City; State; Zip Code Temple, TX 76502	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Payroll Supervisor		9 Employer (See Instructions) Temple ISD
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bratton, Nettie Ruth <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bratton, Nettie Ruth <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braunagel-Brown, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braunagel-Brown, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/374 Rpt: 40/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Nathan <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Nathan <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresnen, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,032.70
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BresnenAssociates, Inc.
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresnen, Sherry <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/374 Rpt: 41/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresnen, Sherry <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewton, Donna <hr/> Contributor address; City; State; Zip Code Mountain Home, TX 78058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridgman, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brim, Amanda <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Public Ed		Employer (See Instructions) Lewisville
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bringmann, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$25.00
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: 39/374 Rpt: 42/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broll, Lorraine <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broll, Lorraine <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not employed
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Patrice <hr/> Contributor address; City; State; Zip Code Richmond, VA 23235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) auditor		Employer (See Instructions) Federal Reserve Bank
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brouillard, Vincent <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jackson <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$50.00
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: 40/374 Rpt: 43/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Molly <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75033	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Three Odd Dogs LLC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Molly <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Three Odd Dogs LLC
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Richard <hr/> Contributor address; City; State; Zip Code Kingston, NY 12401	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Rodney <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, T Lynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/374 Rpt: 44/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browne, Brandon 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) Usacs
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruney, Ggavin Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) Self
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruns, Danielle Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Sonographer		Employer (See Instructions) UT Austin
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, Helen Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, Helen Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/374 Rpt: 45/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, NatAlie <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Stay at home mom		9 Employer (See Instructions) NatAlie Bryan
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Joy <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Network engineer		Employer (See Instructions) TRS
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/374 Rpt: 46/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucher, Matt <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Charles Schwab
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buerschinger, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bukiewicz, Michael <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) U.S. Attorney's Office
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Nan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/374 Rpt: 47/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunton, Evelyn	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunton, Evelyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunton, Evelyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunton, Evelyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunton, Evelyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/374 Rpt: 48/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) WBLT
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) WBLT
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) WBLT
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) WBLT
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) WBLT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/374 Rpt: 49/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Linda <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) WBLT
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdick, Maria <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Joseph <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Joseph <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/374 Rpt: 50/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Joseph	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78628		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Dennis	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Round Rock, TX 78665		
Principal occupation / Job title (See Instructions) ITS		Employer (See Instructions) Round Rock ISD
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Dennis	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78665		
Principal occupation / Job title (See Instructions) ITS		Employer (See Instructions) Round Rock ISD
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnside, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burriss, Dawn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Senior Manager		Employer (See Instructions) Dawn Burriss

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/374 Rpt: 51/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Donna <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77072	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Children's Medical Center Dallas
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burta, Michele <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bushue, Lisa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Michelle <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/374 Rpt: 52/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Michelle	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Michelle	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Michelle	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Michelle	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Marilyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Bristol, VA 24202		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/374 Rpt: 53/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Bristol, VA 24202	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Shannon <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) The University of Texas at Austin
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Shannon <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Social work		Employer (See Instructions) UT Austin
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buxbaum, Laurence <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bykonen, Joan <hr/> Contributor address; City; State; Zip Code Lacey, WA 98503	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/374 Rpt: 54/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrne, Fabiola <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77808	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadenhead, Donald <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadenhead, Donald <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Eric <hr/> Contributor address; City; State; Zip Code Woodhaven, NY 11421	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) staff analyst		Employer (See Instructions) city of new york

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/374 Rpt: 55/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Eric <hr/> 6 Contributor address; City; State; Zip Code Woodhaven, NY 11421	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) staff analyst		9 Employer (See Instructions) city of new york
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Eric <hr/> Contributor address; City; State; Zip Code Woodhaven, NY 11421	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) staff analyst		Employer (See Instructions) city of new york
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Eric <hr/> Contributor address; City; State; Zip Code Woodhaven, NY 11421	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) staff analyst		Employer (See Instructions) city of new york
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Erica <hr/> Contributor address; City; State; Zip Code Woodhaven, NY 11421	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) staff analyst		Employer (See Instructions) city of new york
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Donald L <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/374 Rpt: 56/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Robert <hr/> 6 Contributor address; City; State; Zip Code New Orleans, LA 70114	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Robert <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70114	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campagna, Larry <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Chamberlain Hrdlicka
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Beverly <hr/> Contributor address; City; State; Zip Code Zachary, LA 70791	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Bryan <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) BMC Software

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/374 Rpt: 57/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canales, Abdi <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Bus Operator		9 Employer (See Instructions) Metropolitan Transit Authority of Harris County
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canales, Melissa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Trust fund baby		Employer (See Instructions) No one
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carden, Constance <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Carol <hr/> Contributor address; City; State; Zip Code Mount Jewett, PA 16740	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) priest		Employer (See Instructions) episcopal church
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmack, Deona <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/374 Rpt: 58/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Dee <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Associate, School Finance Experts		9 Employer (See Instructions) HillCo Partners
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Tim <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Jeanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, John <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Randi <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/374 Rpt: 59/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Randi	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78745		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catchman, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Port Richey, FL 34668		
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) marsden
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecilio, Maria Benedita	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Santa Clarita, CA 91387		
Principal occupation / Job title (See Instructions) tax preparer		Employer (See Instructions) H&R Block
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalfie, Deborah	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Champion, Victoria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/374 Rpt: 60/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Champlin, Richard <hr/> 6 Contributor address; City; State; Zip Code Hackettstown, NJ 07840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chander, Suchitra <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, William C <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Christopher <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Judi <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/374 Rpt: 61/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Paul	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pittsburg, TX 75686		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Downingtown, PA 19335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Downingtown, PA 19335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Downingtown, PA 19335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ron	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Phoenix, AZ 85014		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/374 Rpt: 62/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ron <hr/> 6 Contributor address; City; State; Zip Code Phoenix, AZ 85014	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ron <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85014	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapple, Simone <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Hilton
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Butt Public Education PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chicco, Joanne <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/374 Rpt: 63/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Brian <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chlapek, Brenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chlapek, Brenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choban, Gregory <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, Daniel <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94127	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Daniel Choi

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/374 Rpt: 64/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Sandra <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76244	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Corvel Corp
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Alexander <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Haynes and Boone LLP
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Brigitte <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cfo		Employer (See Instructions) ISD
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Paula <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/374 Rpt: 65/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Peter	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Software developer		9 Employer (See Instructions) Sophos
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Timothy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El Cerrito, CA 94530		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clasquin, Lorraine	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code West Lake Hills, TX 78746		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleghorn, Vicki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Diego, CA 92114		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/374 Rpt: 66/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, Vicki	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Amarillo, TX 79109		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, Vicki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Amarillo, TX 79109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cline, Daniel	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Alexandria, VA 22314		
Principal occupation / Job title (See Instructions) Program Analyst		Employer (See Instructions) USDA
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clowe, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mesquite, TX 75150		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coalson, Jerry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Conga

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/374 Rpt: 67/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Larry	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Rockport, TX 78382		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Retired
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Tiffany	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Yorktown, TX 78164		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coghlan, Gregory	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Seattle, WA 98125		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coghlan, Gregory	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Seattle, WA 98125		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coghlan, Gregory	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Seattle, WA 98125		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/374 Rpt: 68/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coghlan, Gregory <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98125	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coghlan, Gregory <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coldiron, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Martha <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colletti, Vincent <hr/> Contributor address; City; State; Zip Code Oneonta, NY 13820	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/374 Rpt: 69/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colliander, Kelsey <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Cathy <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Eddie <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/374 Rpt: 70/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colombo, Senta	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Belmont, CA 94002		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conte, Tracy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Knightdale, NC 27545		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/374 Rpt: 71/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) researcher		9 Employer (See Instructions) Self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/374 Rpt: 72/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) researcher		9 Employer (See Instructions) Self
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Jean <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Jean <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, John <hr/> Contributor address; City; State; Zip Code Haymarket, VA 20169	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Terry G <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions) Williamson County

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/374 Rpt: 73/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Mark <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Technology Consultant		9 Employer (See Instructions) Mark Cooper
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Harold <hr/> Contributor address; City; State; Zip Code Houston, TX 77263	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Harold <hr/> Contributor address; City; State; Zip Code Houston, TX 77263	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Harold <hr/> Contributor address; City; State; Zip Code Houston, TX 77263	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Harold <hr/> Contributor address; City; State; Zip Code Houston, TX 77263	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/374 Rpt: 74/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copley, Victoria <hr/> 6 Contributor address; City; State; Zip Code Wadsworth, OH 44281	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copley, Victoria <hr/> Contributor address; City; State; Zip Code Wadsworth, OH 44281	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppedge, Donna <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotton, Chad <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Empirical Root
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Council, Kenneth D <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/374 Rpt: 75/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousins, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Bayside, NY 11361	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousins, Cynthia <hr/> Contributor address; City; State; Zip Code Bayside, NY 11361	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Camilla <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Bill <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultation		Employer (See Instructions) LLC inc
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Don <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Comm Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/374 Rpt: 76/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Don <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$115.00
8 Principal occupation / Job title (See Instructions) Comm Real Estate		9 Employer (See Instructions) Self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jeffery <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94954	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jeffery <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94954	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Robert <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coyne, Ann-Marie <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/374 Rpt: 77/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Jackson <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Jackson <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crist, Candace <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crist, Candace <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croft, Cheryl <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$100.00
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: 75/374 Rpt: 78/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronin, Andrea <hr/> 6 Contributor address; City; State; Zip Code Manchester, NH 03103	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Lincoln
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crook, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley-Galvin, Susan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) self employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley-Galvin, Susan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) self employed
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley-Galvin, Susan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/374 Rpt: 79/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley-Galvin, Susan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions) social worker		9 Employer (See Instructions) self employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crozier, Mark	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Austin, TX 78703		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Claudio	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Round Rock, TX 78665		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Kevin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77023		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutbirth, Carrie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Katy, TX 77494		
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: 77/374 Rpt: 80/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutbirth, Carrie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Katy, TX 77494		
8 Principal occupation / Job title (See Instructions) Travel Designer		9 Employer (See Instructions) CSB Travel
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Harlan, Ronald	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78665		
Principal occupation / Job title (See Instructions) DELIVERY DRIVER		Employer (See Instructions) United Parcel Service
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/374 Rpt: 81/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Eath, Michael <hr/> Contributor address; City; State; Zip Code Stonewall, TX 78671	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dailey, Jim <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) NONE That is what UNEMPLOYED means.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/374 Rpt: 82/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale, Jo Anna <hr/> 6 Contributor address; City; State; Zip Code Raymore, MO 64083	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Damron, Ken <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Round Rock ISD
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Rebecca <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Rebecca <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Rebecca <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/374 Rpt: 83/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daryl <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Cincinnati
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Cincinnati
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Cincinnati

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/374 Rpt: 84/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45217	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) University of Cincinnati
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Cincinnati
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Frank <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Cincinnati
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, James <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Loss Prevention		Employer (See Instructions) Ross Stores
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, James <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loss Prevention		Employer (See Instructions) Ross Stores

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/374 Rpt: 85/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Patricia	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Austin, TX 78727		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Piper	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cleburne, TX 76033		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) ORS
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawes, Janet	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawes, Janet	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawes, Janet	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/374 Rpt: 86/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawes, Janet <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78752	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawes, Janet <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) E3 Alliance
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Luna, Alisa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Non-profit Director		Employer (See Instructions) Volunteer Legal Services of Central Texas
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Luna, Alisa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Non-profit Director		Employer (See Instructions) Volunteer Legal Services of Central Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/374 Rpt: 87/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Luna, Alisa <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Non-profit Director		9 Employer (See Instructions) Volunteer Legal Services of Central Texas
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Luna, Alisa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Non-profit Director		Employer (See Instructions) Volunteer Legal Services of Central Texas
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeArman, Melinda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeArman, Melinda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeArman, Melinda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/374 Rpt: 88/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeGeus, Eugene <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeGroot, Peter <hr/> Contributor address; City; State; Zip Code Ashland, OR 97520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deese, Charlie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Brilliant Muse LLC
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deese, Charlie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Brilliant Muse LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/374 Rpt: 89/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deese, Charlie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78240	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Brilliant Muse LLC
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deese, Charlie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Brilliant Muse LLC
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Rio, Ana <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delatorre, Kelly <hr/> Contributor address; City; State; Zip Code Irving, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denny, Melba <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
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: 87/374 Rpt: 90/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamandopoulos, Jamie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Daniel <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Apple Inc.
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz-Andrews, Lorraine <hr/> Contributor address; City; State; Zip Code Channelview, TX 77530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Catherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) VIDA Clinic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/374 Rpt: 91/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Author Mindset Rejuvenation		9 Employer (See Instructions) David E. Diehl LLC
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Author Mindset Rejuvenation		Employer (See Instructions) David E. Diehl LLC
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dienger, Patrick <hr/> Contributor address; City; State; Zip Code Winona, MN 55987	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) La Crosse County HA
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dienger, Patrick <hr/> Contributor address; City; State; Zip Code Winona, MN 55987	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) La Crosse County HA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/374 Rpt: 92/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietrichs, Jay <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97219	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietrichs, Jay <hr/> Contributor address; City; State; Zip Code Portland, OR 97219	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diffenderfer, Stephen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Asset Management		Employer (See Instructions) FDIC
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Dennis <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doan, David K. <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/374 Rpt: 93/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobson, Lynne <hr/> 6 Contributor address; City; State; Zip Code West Lake Hills, TX 78746	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) business owner		9 Employer (See Instructions) self
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dochen, Sandy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dollar, Natalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Bonnie <hr/> Contributor address; City; State; Zip Code Greenville, TX 75402	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorval, Bryan <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32960	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) finance		Employer (See Instructions) massmutual

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/374 Rpt: 94/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doty, Rev. Dr. Mark <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglass, Robert <hr/> Contributor address; City; State; Zip Code Lombard, IL 60148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglass, Robert <hr/> Contributor address; City; State; Zip Code Lombard, IL 60148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglass, Robert <hr/> Contributor address; City; State; Zip Code Lombard, IL 60148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglass, Robert <hr/> Contributor address; City; State; Zip Code Lombard, IL 60148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/374 Rpt: 95/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dower, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78726	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired nurse		9 Employer (See Instructions) none
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowhie, Lenny <hr/> Contributor address; City; State; Zip Code Evansville, IN 47712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowling, Martha <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Richard <hr/> Contributor address; City; State; Zip Code Madison, WI 53704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IX Designer		Employer (See Instructions) Enlyte
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driscoll, Vic <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/374 Rpt: 96/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) James Drummond Law Firm PLLC
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James Drummond Law Firm PLLC
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James Drummond Law Firm PLLC
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James Drummond Law Firm PLLC
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James Drummond Law Firm PLLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/374 Rpt: 97/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) James Drummond Law Firm PLLC
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James Drummond Law Firm PLLC
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, Mitchell and Lisa <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dubois, Marit <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Danny <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Manchac Leasing

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/374 Rpt: 98/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, Glenn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dumas, Joy <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Bobby <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, Liz <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Shari <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) Progressive insurance

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/374 Rpt: 99/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutra, Felisberto <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Wholesale Manager		9 Employer (See Instructions) ILF LLC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutra, Felisberto <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Wholesale Manager		Employer (See Instructions) ILF LLC
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, David <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eanes, H. Rad <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eanes, Rad <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/374 Rpt: 100/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eason, Patty <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edelbach, Ralph <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edelbach, Ralph <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edelbach, Ralph <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carolyn <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/374 Rpt: 101/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Judson <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenkranz, Andra <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenkranz, andra <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenkranz, andra <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenkranz, andra <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eick, Francesca <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) K&L Gates
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eick, Francesca <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) K&L Gates

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/374 Rpt: 103/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eick, Francesca	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) K&L Gates
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eick, Francesca	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) K&L Gates
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekstrom, Reynolds R	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Little Rock, AR 72211		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elder, Roxanne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78755		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elder, Roxanne	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Austin, TX 78755		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/374 Rpt: 104/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elissalde, Linda C <hr/> 6 Contributor address; City; State; Zip Code Crystal Beach, TX 77650	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Eduardo <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) Space City Credit Union
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elledge, Carole <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) HHS
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elledge, Carole <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) HHS
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elledge, Richard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/374 Rpt: 105/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elledge, Richard <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) State of Texas
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellinger, Hunter <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) self
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elrod, Catherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmer, Edmund <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Carolene <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) State of Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/374 Rpt: 106/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernst, Jerilyn <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Patricia <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etie, Alba <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/374 Rpt: 107/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkind, Paul <hr/> 6 Contributor address; City; State; Zip Code Grantham, NH 03753	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Brian <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) The University of Texas at Austin
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Justin <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Speech language pathologist		Employer (See Instructions) Memorial hermann
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Paul <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Certain Affinity
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Pete <hr/> Contributor address; City; State; Zip Code San Luis Obispo, CA 93401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/374 Rpt: 108/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everett, Betty J <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everett, Betty J <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everett, Vicki <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOREMAN, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) no employer
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faber, W.J. <hr/> Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/374 Rpt: 109/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fain, bobby <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair, Charles <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair, Charles <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falkstein, Frank <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falli, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Round Rock ISD

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/374 Rpt: 110/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falli, Laura <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farr, Gerald <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Upland Software
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Christopher <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Clickspring Design
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrero, Betty <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/374 Rpt: 111/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrero, Betty <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, David <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Stacey <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) PlainsCapital Bank
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fickling, Sarah <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) AsthmaAllergy and Immunology of North Texas
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figueroa, Sharon <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) RRISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/374 Rpt: 112/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finazzo, Teresa <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) health insurance sales		9 Employer (See Instructions) USHEALTH Advisors
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finazzo, Teresa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) health insurance sales		Employer (See Instructions) USHEALTH Advisors
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fink, Roz <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Michael <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63124	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Deer Creek Foundation
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Robert <hr/> Contributor address; City; State; Zip Code La Crescenta, CA 91224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/374 Rpt: 113/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Robert <hr/> 6 Contributor address; City; State; Zip Code La Crescenta, CA 91224	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzner, Sharron <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleischer, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) M+A Advisor		Employer (See Instructions) Willis
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Maribel <hr/> Contributor address; City; State; Zip Code Desoto, TX 75115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Erica <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/374 Rpt: 114/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fomel, Tatiana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Constance <hr/> Contributor address; City; State; Zip Code Hanover Park, IL 60133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Constance <hr/> Contributor address; City; State; Zip Code Hanover Park, IL 60133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Constance <hr/> Contributor address; City; State; Zip Code Hanover Park, IL 60133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Kittie <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$25.00
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: 112/374 Rpt: 115/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foreman, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forney, Jan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Erin <hr/> Contributor address; City; State; Zip Code Ames, IA 50010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Mary Greeley Medical Center
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortunato, Vito <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78691	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Joan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/374 Rpt: 116/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Cari <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) teacher/minister		9 Employer (See Instructions) school
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Clara <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) MD Anderson Cancer Center
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, FredErick <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Disability Consultant		Employer (See Instructions) Self
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, James <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Jamie <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) St. Mary's Catholic School

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/374 Rpt: 117/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Michelle <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraga, Fred <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) 129 Plaza Drive Universal City Tx 78148
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Framnes, Jeffrey <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Baylor Scott and White
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Roseanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Independent

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/374 Rpt: 119/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Barbara <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frery, Marsha <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frery, Marsha <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier-Hunt, Deirdre <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) FjH Entertainment
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frede, Martha <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
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: 117/374 Rpt: 120/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Anita <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Hannah <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Round rock ISD
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frieman, Jonathan <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friemel, Frank <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) pipe organ architect		Employer (See Instructions) Frank Friemel designer
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friemel, Frank <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) pipe organ architect		Employer (See Instructions) Frank Friemel designer

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/374 Rpt: 121/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friemel, Frank <hr/> 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) pipe organ architect		9 Employer (See Instructions) Frank Friemel designer
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Edmund Carter <hr/> Contributor address; City; State; Zip Code Houston, TX 77074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Maurine <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funderburk, Marc <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) LandPatterns Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/374 Rpt: 122/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funderburk, Marc <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) LandPatterns Inc.
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funderburk, Marc <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) LandPatterns Inc.
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furnas, Paul <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G. Cameron, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddy Jr, Charles M <hr/> Contributor address; City; State; Zip Code Corsicana, TX 75110	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/374 Rpt: 123/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gadell, Diane <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaeta, Marilyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaeta, Marilyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gainer, Barbara <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallardo Vasquez, Deloise <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$50.00
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: 121/374 Rpt: 124/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcea, Mary F <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76710	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Daniel <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Ortus Solutions
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Michael <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Robert <hr/> Contributor address; City; State; Zip Code Poth, TX 78147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Data entry clerk		Employer (See Instructions) Ortega group
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garvin, Frances <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/374 Rpt: 125/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Daniel	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Conroe, TX 77306		
8 Principal occupation / Job title (See Instructions) Doctor		9 Employer (See Instructions) self
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gautam, Sohni	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Los Angeles, CA 90046		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Offices of Nico N. Tabibi APC
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gautam, Sohni	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Burbank, CA 91504		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) O'Hagan Meyer
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gavenda, Beverly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78758		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Maia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Portland, OR 97202		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/374 Rpt: 126/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebhard, Carole <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebhard, Carole <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebhard, Carole <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Keri <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/374 Rpt: 127/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerold, Jeff <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Non-profit		9 Employer (See Instructions) National Philanthropic Trust
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gezana, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Austin State Hospital
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Maria-Elena <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PhD student		Employer (See Instructions) UT LBJ Public Public Affairs
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Maria-Elena <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PhD student		Employer (See Instructions) UT LBJ Public Public Affairs
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Maria-Elena <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PhD student		Employer (See Instructions) UT LBJ Public Public Affairs

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/374 Rpt: 128/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Maria-Elena <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PhD student		9 Employer (See Instructions) UT LBJ Public Public Affairs
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ging, Chris <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gladney, Elva <hr/> Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Outlines Menswear
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/374 Rpt: 129/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75205		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Outlines Menswear

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/374 Rpt: 130/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) Outlines Menswear
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldsmith, Abe J. <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Dauna <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78268	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Judy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Judith Gomez
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonin, Paul <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/374 Rpt: 131/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonin, Paul <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonin, Paul <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/374 Rpt: 132/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77591	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gordon <hr/> Contributor address; City; State; Zip Code Texas City, TX 77591	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodall, Donetta <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodfriend, Gary <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/374 Rpt: 133/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooding, Connie <hr/> 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Dennis <hr/> Contributor address; City; State; Zip Code Athens, GA 30605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Dennis <hr/> Contributor address; City; State; Zip Code Athens, GA 30605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Isaac <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) IRS
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Debra <hr/> Contributor address; City; State; Zip Code Millsboro, DE 19966	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/374 Rpt: 134/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) bookkeeper		9 Employer (See Instructions) Lone Star Bean
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) Lone Star Bean
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) Lone Star Bean
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Cary <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/374 Rpt: 135/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graef, Janis <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graef, Janis <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graeme, Wm <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graeme, Wm <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/374 Rpt: 136/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/374 Rpt: 137/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/374 Rpt: 138/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Michelle <hr/> 6 Contributor address; City; State; Zip Code Coto De Caza, CA 92679	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sandra <hr/> Contributor address; City; State; Zip Code El Reno, OK 73036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Home Health CEO		Employer (See Instructions) All The Little Things Count
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sandra <hr/> Contributor address; City; State; Zip Code El Reno, OK 73036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Home Health CEO		Employer (See Instructions) All The Little Things Count
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sandra <hr/> Contributor address; City; State; Zip Code El Reno, OK 73036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Home Health CEO		Employer (See Instructions) All The Little Things Count
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sandra <hr/> Contributor address; City; State; Zip Code El Reno, OK 73036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Home Health CEO		Employer (See Instructions) All The Little Things Count

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/374 Rpt: 139/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Fitzsimmons, Guthrie <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Communications Director		9 Employer (See Instructions) BJC
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Colin <hr/> Contributor address; City; State; Zip Code Denver, CO 80205	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) colinta LLC
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Ben <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Alex L <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenleaf, Samantha <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Asst. Principal		Employer (See Instructions) Austin ISD

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/374 Rpt: 140/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenleaf, Samantha <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Assistant Principal		9 Employer (See Instructions) Austin ISD
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg, Alex <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Elizabeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Timothy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Stefanie and Stephen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Griffith Properties

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/374 Rpt: 141/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grinnan, Andrew <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossberg, Lawrence <hr/> Contributor address; City; State; Zip Code Hillsborough, NC 27278	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Maria <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutowski, Adam <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H Gibson, Robert <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Risk & Compliance Manager		PDI Technologies

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/374 Rpt: 142/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haan, William <hr/> 6 Contributor address; City; State; Zip Code Grand Rapids, MI 49525	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Analysr		9 Employer (See Instructions) CEI CMH
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Michael <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haight, Sue Anne <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/374 Rpt: 143/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haimson, Leonie <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Advocate		9 Employer (See Instructions) Class size matters
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haimson, Leonie <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Advocate		Employer (See Instructions) Class size matters
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Abigail <hr/> Contributor address; City; State; Zip Code Barton, VT 05822	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Evan <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Evan Hall
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallford, Christine <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/374 Rpt: 144/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallowell, Jane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Lee <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Douglas <hr/> Contributor address; City; State; Zip Code Seattle, WA 98112	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer / editor		Employer (See Instructions) Resources Online
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handler, Jeff <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22031	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) JKW Group LLC
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannon, Sean <hr/> Contributor address; City; State; Zip Code Chicago, IL 60640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Walgreens

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/374 Rpt: 145/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanvey, Phyllis	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78633		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Seton Healthcare
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happenny, Stephen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Auburn, WA 98092		
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) FAA
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harhai, Deborah	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78250		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harhai, Deborah	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78250		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Leslie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/374 Rpt: 146/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Leslie <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LPC		Employer (See Instructions) self
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LPC		Employer (See Instructions) self
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/374 Rpt: 147/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla Maria <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harringer, Carla Maria <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/374 Rpt: 148/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Clint	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Round Rock, TX 78665	
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) Corsair Consulting LLC
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Julia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sharon T	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Carrie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Red Oak, TX 75154	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Carrie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Red Oak, TX 75154	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/374 Rpt: 149/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Carrie <hr/> 6 Contributor address; City; State; Zip Code Red Oak, TX 75154	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Carrie <hr/> Contributor address; City; State; Zip Code Red Oak, TX 75154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haude, Shay <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pflugerville ISD
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haycraft, Tom <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professional Driver		Employer (See Instructions) Maverick Transportation
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haycraft, Tom <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professional Driver		Employer (See Instructions) MavErick Transportation LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/374 Rpt: 150/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Christine <hr/> 6 Contributor address; City; State; Zip Code Anaheim, CA 92807	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Employed		9 Employer (See Instructions) Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Veronica <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healey, Cathy <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Texas Dept of Family and Protective Services
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebson, Ciera <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Capitol Credit Union
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/374 Rpt: 151/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heffernan, Joyce <hr/> 6 Contributor address; City; State; Zip Code Woodland Park, NJ 07424	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heim, Lawrence <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96817	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) HONBLUE Inc.
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heine, Christopher <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helge, Nancy <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemberger, Caroline <hr/> Contributor address; City; State; Zip Code Sand Springs, OK 74063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) care giver		Employer (See Instructions) Independent Opportunities Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/374 Rpt: 152/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hembree, Jane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/374 Rpt: 153/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Tyler, TX 75701		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/374 Rpt: 154/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, David <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, George <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrick, Pete <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired Professor		Employer (See Instructions) Austin Presbyterian Theological Seminary
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henning, Elisabeth <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) self
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, Jane <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/374 Rpt: 155/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, Jane <hr/> 6 Contributor address; City; State; Zip Code Taylor, TX 76574	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) State of Texas
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, Jane <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hepler, Ron <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Beverly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Herring & Panzer LLP

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hess, Myron <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Office of Myron Hess PLLC
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Kellie <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilborn, Ann <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilborn, Ann <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/374 Rpt: 157/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Jacob <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55406	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Randall <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga teacher		Employer (See Instructions) LASR
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga teacher		Employer (See Instructions) LASR
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga teacher		Employer (See Instructions) LASR

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/374 Rpt: 158/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobley, David	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Livonia, MI 48150		
8 Principal occupation / Job title (See Instructions) Tax consultant		9 Employer (See Instructions) Ernst & Young
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobley, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Livonia, MI 48150		
Principal occupation / Job title (See Instructions) Tax consultant		Employer (See Instructions) Ernst & Young
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobley, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Livonia, MI 48150		
Principal occupation / Job title (See Instructions) Tax consultant		Employer (See Instructions) Ernst & Young
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Carla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Coupland, TX 78615		
Principal occupation / Job title (See Instructions) Rental Manager		Employer (See Instructions) Carla Hoffman
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Sheri	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) diagnostician		Employer (See Instructions) Invohealthcare

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Sheri <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) diagnostician		9 Employer (See Instructions) Invohealthcare
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Sheri <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) diagnostician		Employer (See Instructions) Invohealthcare
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Sheri <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) diagnostician		Employer (See Instructions) Invohealthcare
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffmann, Bethany <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Pathway
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holden, Cynthia <hr/> Contributor address; City; State; Zip Code New York, NY 10040	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/374 Rpt: 160/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holden, Ruth	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Jefferson, ME 04348		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Walter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78732		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Walter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78732		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollaway, Stephen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingshead, Jana	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Hastings On Hudson, NY 10706		
Principal occupation / Job title (See Instructions) Beauty Director		Employer (See Instructions) Cond Nast

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Charles <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77081	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Huntsman llc
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honig, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Hanna <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$35.00
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#: _____) Hooper, Hanna <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Hanna <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Kathy <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Kathy <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horecky, Henrietta <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore <hr/> Contributor address; City; State; Zip Code Atherton, CA 94027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore <hr/> Contributor address; City; State; Zip Code Atherton, CA 94027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Atherton, CA 94027		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Atherton, CA 94027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Atherton, CA 94027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Lenore	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Atherton, CA 94027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, William	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/374 Rpt: 164/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77062		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, My	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Technical Program Director		Employer (See Instructions) Charles Schwab

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/374 Rpt: 165/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, My <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Technical Program Director		9 Employer (See Instructions) Charles Schwab
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, My <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technical Program Director		Employer (See Instructions) Charles Schwab
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, My <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technical Program Director		Employer (See Instructions) Charles Schwab
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, My <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technical Program Director		Employer (See Instructions) Charles Schwab
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howden, Norman <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) DCCCD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/374 Rpt: 166/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Barbara <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howze, CS Damon <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Bart <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Nancy <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huggins, Dale <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Commercial realty		Employer (See Instructions) MDH Properties

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/374 Rpt: 167/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huggins, Mary <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huggins, Mary <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huggins, Mary <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huguenin, Alva <hr/> Contributor address; City; State; Zip Code Rancho Murieta, CA 95683	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Elizabeth <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Unemployed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/374 Rpt: 168/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78411	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Unemployed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Elizabeth <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Unemployed
Date 07/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Elizabeth <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Unemployed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurta, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$10.00
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: 166/374 Rpt: 169/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Sa <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78229	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Technical Writer		9 Employer (See Instructions) Def-Logix Inc.
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyde, Bridget <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyde, Deborah <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igou, Tipton <hr/> Contributor address; City; State; Zip Code Vernon, TX 76384	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ireson, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/374 Rpt: 170/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ireson, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Clinical Social Worker		9 Employer (See Instructions) Self
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iscoe, Neil <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Technology Executive		Employer (See Instructions) Retired
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isgur, Lea <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jabri, Nidal Radwan <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scientists		Employer (See Instructions) Walgreens
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Joyce <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None - retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/374 Rpt: 171/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Joyce <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None - retired
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Marge <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$25.00
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#: _____) James, Susan <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasnocha, Zach <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) School Administrator		Employer (See Instructions) KIPP Austin Public Schools
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Gary <hr/> Contributor address; City; State; Zip Code Durango, CO 81301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/374 Rpt: 172/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$6.24
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$6.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$6.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$6.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jiganti, Mark <hr/> Contributor address; City; State; Zip Code Gunnison, CO 81230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/374 Rpt: 173/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johansen, Connie <hr/> 6 Contributor address; City; State; Zip Code St George, UT 84770	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Bette <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Bette <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Bette <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Bette <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/374 Rpt: 174/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Robert	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Norman, OK 73071		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) University of Oklahoma
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Geraldne Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Belton, TX 76513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lockhart, TX 78644		
Principal occupation / Job title (See Instructions) Design Manager		Employer (See Instructions) Kelleygraphics
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randall	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Dallas, TX 75219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Victor	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ventura, CA 93004		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/374 Rpt: 175/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Amanda	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78665		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Torch Literary Arts
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Mary Lu	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Co-Executive Director		Employer (See Instructions) Be The Neighbor
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jolly, Monica	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bruce	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bruce	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/374 Rpt: 176/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Cathy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, James <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) Texas Senate
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Patricia <hr/> Contributor address; City; State; Zip Code Antioch, CA 94509	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/374 Rpt: 177/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Robert	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75218		
8 Principal occupation / Job title (See Instructions) investor		9 Employer (See Instructions) self
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sheri	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) N/a		Employer (See Instructions) N/a
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sheri	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) N/a		Employer (See Instructions) N/a
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Duncanville, TX 75137		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Duncanville, TX 75137		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/374 Rpt: 178/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet <hr/> 6 Contributor address; City; State; Zip Code Duncanville, TX 75137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jung, Brian <hr/> Contributor address; City; State; Zip Code La Mirada, CA 90638	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mgmt Analyst		Employer (See Instructions) Los Angeles City
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K, Kristina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/374 Rpt: 179/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, THOMAS <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Cypress Fairbanks ISD
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamen Miller, Pauline <hr/> Contributor address; City; State; Zip Code Troy, NY 12180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) program coordinator		Employer (See Instructions) City of Austin
Date 10/22/2023	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	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katsigiannis, Alison <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive assistant		Employer (See Instructions) Miro

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/374 Rpt: 180/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaul, Gracie <hr/> 6 Contributor address; City; State; Zip Code Brentwood, TN 37027	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Account Director		9 Employer (See Instructions) Panorama
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Kathleen <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Kathleen <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Cynthia <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
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: 178/374 Rpt: 181/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Susan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78759		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, troy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Remodel carpenter		Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellgreen, Theresa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ben Lomond, CA 95005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendelbacher, Thomas	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code El Lago, TX 77586		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Airbus DS Space Systems Inc.
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Patricia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookfield, VT 05036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/374 Rpt: 182/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Patricia <hr/> 6 Contributor address; City; State; Zip Code Brookfield, VT 05036	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenrick, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
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#: _____) Kenyon, Terry <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kenyon & Sproull P.C.
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenyon, Terry <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kern, Rita <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/374 Rpt: 183/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerr, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTING		9 Employer (See Instructions) DISORBO CONSULTING LLP
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kettlewell, Susan <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pediatric Medical Supplies Coordinator		Employer (See Instructions) Tender Care Medical Supply
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Ali R. <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Encotech
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilgore, Amanda <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimbrough, Harriet <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76135	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/374 Rpt: 184/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Heather <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) KoonsFuller
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Lisa <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Satellite Industries
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirchoff, Deanna <hr/> Contributor address; City; State; Zip Code Lafayette, CO 80026	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Belinda <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) SOS
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirksey, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/374 Rpt: 185/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirksey, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirksey, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirschman, Jane <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lead Publishing Review Specialist		Employer (See Instructions) Houghton Mifflin Harcourt
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirschman, Jane <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lead Publishing Review SpeciAlist		Employer (See Instructions) Houghton Mifflin Harcourt
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klecka, Peggy <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/374 Rpt: 186/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klecka, Peggy <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klosterboer, Brian <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klyn, Mark <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) School Psychologist		Employer (See Instructions) Burkburnett ISD
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Dianne <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Harold <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/374 Rpt: 187/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Mark <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koch, Amanda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Windstream
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koppel, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Foundation Director		Employer (See Instructions) Shalom Austin
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koskovick, Daniel <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85251	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kosted, Kurt <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MPM		Employer (See Instructions) Applied Materials

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/374 Rpt: 188/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozera, Jeffery <hr/> Contributor address; City; State; Zip Code Newburyport, MA 01950	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Biogen
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/374 Rpt: 189/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> 6 Contributor address; City; State; Zip Code Huffman, TX 77336	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/374 Rpt: 190/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Huffman, TX 77336		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Huffman, TX 77336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Huffman, TX 77336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Huffman, TX 77336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Huffman, TX 77336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/374 Rpt: 191/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 09/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> 6 Contributor address; City; State; Zip Code Huffman, TX 77336	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kracht, Russell <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/374 Rpt: 192/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krasne, Robert <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79912	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krasne, Robert <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, Maria <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, Maria <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuba, Richard <hr/> Contributor address; City; State; Zip Code Hagerstown, MD 21740	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/374 Rpt: 193/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kullberg, Vicki <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Deanna <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legislative Consultant		Employer (See Instructions) Self (Deanna L. Kuykendall Inc)
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwak, Idali <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Miller, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGuette, Arielle <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Favor Delivery

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/374 Rpt: 194/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGuette, Arielle <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales Manager		9 Employer (See Instructions) Favor Delivery
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGuette, Arielle <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Favor Delivery
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGuette, Arielle <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Favor Delivery
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMance Sarrett, Ben & Nancy <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMance Sarrett, Ben & Nancy <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/374 Rpt: 195/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMance Sarrett, Ben & Nancy <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladd, Karen <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Account		Employer (See Instructions) Hudnall & Pitts PLLC
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laibson, Alan <hr/> Contributor address; City; State; Zip Code Asheville, NC 28804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) K&
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lain, Thomas <hr/> Contributor address; City; State; Zip Code Uvalde, TX 78801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lain, Thomas <hr/> Contributor address; City; State; Zip Code Uvalde, TX 78801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/374 Rpt: 196/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lain, Thomas 6 Contributor address; City; State; Zip Code Uvalde, TX 78801	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Margaret Contributor address; City; State; Zip Code Kingsville, TX 78363	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landsman, Steve Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landsman, Steve Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landsman, Steve Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/374 Rpt: 197/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Ivan	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code La Marque, TX 77568		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Ivan Langford
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langtry, Lois	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Amos	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Fairfield, TX 75840		
Principal occupation / Job title (See Instructions) Bus Driver		Employer (See Instructions) Fairfield ISD
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lasky, Monica	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Leander
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laster, Dorothea	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self/Hopkins-Laster Law Office

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/374 Rpt: 198/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laster, Dorothea <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self/Hopkins-Laster Law Office
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latham, Jeff <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Spectrum
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laube, Eric <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Eric Laube
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laube, Eric <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Eric Laube
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauterbach, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) webb & lauterbach pc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/374 Rpt: 199/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Don <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, Patrick <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baker Botts
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavue, Theresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) Lake Travis ISD
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Gregory <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Steven <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Democratic Donor. MA		Employer (See Instructions) Lee's 95887 Offices

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/374 Rpt: 200/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Steven	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code San Francisco, CA 94115		
8 Principal occupation / Job title (See Instructions) Democratic Donor. MA		9 Employer (See Instructions) Lee's 95887 Offices
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Steven	Amount of Contribution (\$) \$2.07
Contributor address; City; State; Zip Code San Francisco, CA 94115		
Principal occupation / Job title (See Instructions) Democratic Donor. MA		Employer (See Instructions) Lee's 95887 Offices
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Steven	Amount of Contribution (\$) \$2.13
Contributor address; City; State; Zip Code San Francisco, CA 94115		
Principal occupation / Job title (See Instructions) Democratic Donor. MA		Employer (See Instructions) Lee's 95887 Offices
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Patterson, Barron	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Nashville, TN 37205		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Vanderbilt University Medical Center
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legacy 44	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78756		
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: 198/374 Rpt: 201/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh Tobolka, Darby <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78726	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Math SpeciAlist		9 Employer (See Instructions) Leander ISD
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemm, Janice <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) Wood
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lengefeld, Grant <hr/> Contributor address; City; State; Zip Code Hamilton, TX 76531	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Weekly newspaper owner		Employer (See Instructions) Hamilton Herald-News LLC
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Suzanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/374 Rpt: 202/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Jana <hr/> 6 Contributor address; City; State; Zip Code Bartlett, TX 76511	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Letchworth, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Eileen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieb, Ziskind R <hr/> Contributor address; City; State; Zip Code Pipersville, PA 18947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Composer/Arranger		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/374 Rpt: 203/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, John <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22201	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lind, Linda <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PA		Employer (See Instructions) SMG
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, Rosanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/374 Rpt: 204/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NRS IV		9 Employer (See Instructions) State of Texas
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linson, Andrea <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) State of Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/374 Rpt: 205/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisowski, Anita <hr/> 6 Contributor address; City; State; Zip Code Shickshinny, PA 18655	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlejohn, Julie <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Shawn <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) Zilliant
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Shawn <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) Zilliant
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
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: 203/374 Rpt: 206/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Law		9 Employer (See Instructions) Loewy Law Firm
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lotz, Frank <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lotz, Frank <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lotz, Frank <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lotz, Frank <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/374 Rpt: 207/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Julia <hr/> 6 Contributor address; City; State; Zip Code Rio Medina, TX 78066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, Manuel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, Manuel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumpkin, Sandra B <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Catholic school
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumpkin, Sandra B <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Catholic school

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/374 Rpt: 208/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumpkin, Sandra B <hr/> 6 Contributor address; City; State; Zip Code Taylor, TX 76574	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Catholic school
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumpkin, Sandra B <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Catholic school
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunning, Everett <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutschg, Meghan <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mother		Employer (See Instructions) Self
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ly, Oanh <hr/> Contributor address; City; State; Zip Code Culver City, CA 90232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) no religion in school		Employer (See Instructions) God

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/374 Rpt: 209/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Nancy <hr/> 6 Contributor address; City; State; Zip Code West Lake Hills, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Nancy <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Nancy <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Nancy <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackenzie, Larami <hr/> Contributor address; City; State; Zip Code Glenside, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Dr.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/374 Rpt: 210/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddern, Richard <hr/> 6 Contributor address; City; State; Zip Code Kingsland, TX 78639	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maikell, Glenda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) None
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mainz, Barbara <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Cecelia <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Doctors Office
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malloch, Wendy <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Freescale

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/374 Rpt: 211/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malloch, Wendy <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineering Manager		9 Employer (See Instructions) Freescale
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malloch, Wendy <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Freescale
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Pat <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Vincent <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Phoenix American
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manroe, Helen <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/374 Rpt: 212/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manthey, Ronald <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manzar, Aizaz <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) director		Employer (See Instructions) amazon
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Funderburk, Alsa <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Funderburk, Asla <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marek, Sharron <hr/> Contributor address; City; State; Zip Code Port Lavaca, TX 77979	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/374 Rpt: 213/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marez, Jose <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Shipping and Receiving		9 Employer (See Instructions) Graftek Imaging Inc
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margolis, Eve <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, D Arlyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, William <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsh, William <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/374 Rpt: 214/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Jeremy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Manassas, VA 20112		
8 Principal occupation / Job title (See Instructions) Officer		9 Employer (See Instructions) U.S. Air Force
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Maria	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Paula	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Kingwood, TX 77339		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Starksboro, VT 05487		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Suzy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sugar Land, TX 77478		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/374 Rpt: 215/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinek, Bernard D <hr/> 6 Contributor address; City; State; Zip Code Ennis, TX 75119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Daniel <hr/> Contributor address; City; State; Zip Code Germantown Hills, IL 61548	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Caterpillar Inc
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Janette <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Associate		Employer (See Instructions) Isaacson Miller
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mashman, Jan <hr/> Contributor address; City; State; Zip Code Mount Pleasant, SC 29464	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Kate <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pharmacy Technician		Employer (See Instructions) Genoa Pharmacy

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/374 Rpt: 216/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matujec, James	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77092		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Virginia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lawn, TX 79530		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Robert	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78723		
Principal occupation / Job title (See Instructions) Assessment SpeciAlist		Employer (See Instructions) Houghton Mifflin Harcourt
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Georgia	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/374 Rpt: 217/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClennen, Jerri <hr/> 6 Contributor address; City; State; Zip Code Streetman, TX 75859	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollough, Rhonda <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McComas, Dustin <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCorquodale, Pat <hr/> Contributor address; City; State; Zip Code Mason, TX 76856	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Janetta <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/374 Rpt: 218/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Financial Analyst		9 Employer (See Instructions) Health and Human Svc Dept
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Health and Human Svcs Dept
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Robert <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGhee, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGhee, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/374 Rpt: 219/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGhee, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGimsey, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHorse, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McGinnis Lochridge
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Jenny <hr/> Contributor address; City; State; Zip Code Tallahassee, FL 32303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Alan <hr/> Contributor address; City; State; Zip Code Willow, NY 12495	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/374 Rpt: 220/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Alan <hr/> 6 Contributor address; City; State; Zip Code Willow, NY 12495	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) artist		9 Employer (See Instructions) Alan McKnight
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Alan <hr/> Contributor address; City; State; Zip Code Willow, NY 12495	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) Alan McKnight
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillin, Dolores <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillion, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/374 Rpt: 221/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNabb, James <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Alesa <hr/> Contributor address; City; State; Zip Code DPO, AP 96303	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRae, Tommy <hr/> Contributor address; City; State; Zip Code Cordova, TN 38016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdougale, Marta <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SpeciAlist		Employer (See Instructions) Austin Energy
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcnellie, Myra <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/374 Rpt: 222/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcnellie, Myra	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Nacogdoches, TX 75961		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcnellie, Myra	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Nacogdoches, TX 75961		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mead, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mead, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mear, Sharon	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/374 Rpt: 223/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mear, Sharon <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meehan, Jeanne <hr/> Contributor address; City; State; Zip Code Lake Worth, FL 33460	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Virgin Voyages
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehlhorn, Michelle <hr/> Contributor address; City; State; Zip Code Richmond, CA 94805	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehlhorn, Michelle <hr/> Contributor address; City; State; Zip Code Richmond, CA 94805	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehlhorn, Michelle <hr/> Contributor address; City; State; Zip Code Richmond, CA 94805	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/374 Rpt: 224/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meinzer, Sarah <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melina, Patricia <hr/> Contributor address; City; State; Zip Code Land O Lakes, FL 34637	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melina, Patricia <hr/> Contributor address; City; State; Zip Code Land O Lakes, FL 34637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellor, Sarah <hr/> Contributor address; City; State; Zip Code Portland, OR 97222	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) donor support manager		Employer (See Instructions) actblue
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltzer, Scott <hr/> Contributor address; City; State; Zip Code Nashville, TN 37208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) National Network of State Teachers of the Year

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/374 Rpt: 225/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menard, Matthew <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) self
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Erika <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesman, Caroline <hr/> Contributor address; City; State; Zip Code Florence, OR 97439	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesman, Caroline <hr/> Contributor address; City; State; Zip Code Florence, OR 97439	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metni, Alan <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) iffly holdings llc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/374 Rpt: 226/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaels, Sara <hr/> 6 Contributor address; City; State; Zip Code Lott, TX 76656	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance agent		9 Employer (See Instructions) BSWHP
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaels, Sara <hr/> Contributor address; City; State; Zip Code Lott, TX 76656	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) BSWHP
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaels, Sara <hr/> Contributor address; City; State; Zip Code Lott, TX 76656	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) BSWHP
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaels, Sara <hr/> Contributor address; City; State; Zip Code Lott, TX 76656	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) BSWHP
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mikels, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
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: 224/374 Rpt: 227/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cindy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) WSB
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired social worker		Employer (See Instructions) US Army Substance Abuse Program
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kent C <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) none
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kent C <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) none
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kent C <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/374 Rpt: 228/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kent C <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/374 Rpt: 229/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minica, Beverly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/374 Rpt: 230/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Emily <hr/> 6 Contributor address; City; State; Zip Code Eules, TX 76040	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Special Events Manager		9 Employer (See Instructions) Grapevine Relief And Community Exchange
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Missner, Michele <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Randy <hr/> Contributor address; City; State; Zip Code Rockville, MD 20849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MGMT		Employer (See Instructions) Private Capital Development LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/374 Rpt: 231/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Randy <hr/> 6 Contributor address; City; State; Zip Code Rockville, MD 20849	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MGMT		9 Employer (See Instructions) Private Capital Development LLC
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Randy <hr/> Contributor address; City; State; Zip Code Rockville, MD 20849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MGMT		Employer (See Instructions) Private Capital Development LLC
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchelle, Randy <hr/> Contributor address; City; State; Zip Code Rockville, MD 20849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MGMT		Employer (See Instructions) Private Capital Development LLC
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohle, Ken <hr/> Contributor address; City; State; Zip Code Deer Park, TX 77536	Amount of Contribution (\$) \$5.00
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: 229/374 Rpt: 232/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moir, Alex <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Organizer		9 Employer (See Instructions) TSEU
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moir, Alex <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) TSEU
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moldenhauer, Sheila <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mondragon, Carlos <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Self
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monkman, Amy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) RRISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/374 Rpt: 233/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montesano, Claudia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) Northside ISD
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moor, Barbara <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Beverly <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Technical Program Director		Employer (See Instructions) Charles Schwab
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Cheryl <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Dorcas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/374 Rpt: 234/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Dorcas <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Joe <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92672	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Joe <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92672	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Digital Engineer		Employer (See Instructions) Halcon Construction
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Digital Engineer		Employer (See Instructions) Halcon Construction

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/374 Rpt: 235/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Carol <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79414	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Career Counselor/Writer		9 Employer (See Instructions) Self-employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LTC Sigc		Employer (See Instructions) US ARMY
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Laird <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Montie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Trace <hr/> Contributor address; City; State; Zip Code Westminster, CO 80021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Renewable Energy Ststems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/374 Rpt: 236/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morley, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, John <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Nina <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Brookside Farm
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Rosemary <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosty, Hilary <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/374 Rpt: 237/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosty, Hilary <hr/> 6 Contributor address; City; State; Zip Code Kerrville, TX 78028	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mouhot, Sandra <hr/> Contributor address; City; State; Zip Code Brookfield, IL 60513	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mouhot, Sandra <hr/> Contributor address; City; State; Zip Code Brookfield, IL 60513	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Ernest <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) High tech worker		Employer (See Instructions) Six Nines IT
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Ernest <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) High tech worker		Employer (See Instructions) Six Nines IT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/374 Rpt: 238/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Paul	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Liberty Hill, TX 78642		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munger, Gregg	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Midland, TX 79707		
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Rental company
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Julia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Weaverville, NC 28787		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdock, Ken	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdock, Ken	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Texas State University

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/374 Rpt: 239/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdock, Linda <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdock, Linda <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Deborah <hr/> Contributor address; City; State; Zip Code Buffalo, NY 14214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/374 Rpt: 240/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> 6 Contributor address; City; State; Zip Code Pacifica, CA 94044	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Mary Lu <hr/> Contributor address; City; State; Zip Code Pacifica, CA 94044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/374 Rpt: 241/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Patricia <hr/> 6 Contributor address; City; State; Zip Code Sunset Valley, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musslewhite, Chris <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Scientist		Employer (See Instructions) City of Austin
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Napurano, Lisa <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Andrew <hr/> Contributor address; City; State; Zip Code Myrtle Beach, SC 29575	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fundraiser		Employer (See Instructions) Childrens Miracle Network
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Angela <hr/> Contributor address; City; State; Zip Code Torrance, CA 90505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/374 Rpt: 242/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Angela <hr/> 6 Contributor address; City; State; Zip Code Torrance, CA 90505	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Donna <hr/> Contributor address; City; State; Zip Code Kaufman, TX 75142	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Crandall ISD
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Milam <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vinson & Elkins LLP
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Milam <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vinson & Elkins LLP
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Bang <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) RTI

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/374 Rpt: 243/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Thach <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95132	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichol, Debra <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Care Giver		Employer (See Instructions) Home instead
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Judith <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Art <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78204	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nisbet, Mark <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28270	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Bourbon Drinker		Employer (See Instructions) The Universe

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/374 Rpt: 244/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nokes, Jill <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan Comito, Nancy <hr/> Contributor address; City; State; Zip Code Clifton, NJ 07013	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nora, Hope <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nora, Hope <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nora, Hope <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/374 Rpt: 245/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Robert <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowlin, Jan <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noyes, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) OXY
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunnelley, Carol <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Gary <hr/> Contributor address; City; State; Zip Code Powderly, TX 75473	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/374 Rpt: 246/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Gary <hr/> 6 Contributor address; City; State; Zip Code Powderly, TX 75473	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Gary <hr/> Contributor address; City; State; Zip Code Powderly, TX 75473	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Gary <hr/> Contributor address; City; State; Zip Code Powderly, TX 75473	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Maureen <hr/> Contributor address; City; State; Zip Code Branford, CT 06405	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBERHOLTZER, JENNIE <hr/> Contributor address; City; State; Zip Code Fairport, NY 14450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/374 Rpt: 247/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEILL, Tiffany <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78208	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oatman, Kenneth <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Mission Solar Energy
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochoa, Omar <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Omar Ochoa Law Firm PC
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivarez, Cruz <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivarez, Cruz <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/374 Rpt: 248/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivarez, Sheila	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78748		
8 Principal occupation / Job title (See Instructions) Admin Asst		9 Employer (See Instructions) THLA
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olmo, Victoria	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ingleside, TX 78362		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Destiny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Lyndon	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Waco, TX 76710		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkun, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Special Projects Manager		Employer (See Instructions) TIADA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/374 Rpt: 249/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkun, Maria	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions) Special Projects Manager		9 Employer (See Instructions) TIADA
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkun, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Special Projects Manager		Employer (See Instructions) TIADA
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkun, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Special Projects Manager		Employer (See Instructions) TIADA
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkun, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Special Projects Manager		Employer (See Instructions) TIADA
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Mark	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78758		
Principal occupation / Job title (See Instructions) Mortgage banker		Employer (See Instructions) Colonial savings

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/374 Rpt: 250/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Mark <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Mortgage banker		9 Employer (See Instructions) Colonial savings
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Cynthia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) uthscsa
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, JoAnne <hr/> Contributor address; City; State; Zip Code Mission, KS 66202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) business manager		Employer (See Instructions) Community LINC
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, JoAnne <hr/> Contributor address; City; State; Zip Code Houston, TX 77043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oxley, Sandy <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) association manager		Employer (See Instructions) cayon pacific mgmt

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/374 Rpt: 251/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) P Hernandez, Beverly <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, John <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Cirrus Logic
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Painter, Joe <hr/> Contributor address; City; State; Zip Code Norfolk, VA 23510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Affinaquest
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palais, Bob <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Utah
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palcewski, Barbara <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/374 Rpt: 252/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pankonien, Laura <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parada, Maria <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tax specialist		Employer (See Instructions) Rignet
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Sheldon <hr/> Contributor address; City; State; Zip Code Lecanto, FL 34461	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parson, Toni <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Francisco <hr/> Contributor address; City; State; Zip Code Lakeville, MN 55044	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Sr. Product Manager		Employer (See Instructions) Best Buy

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/374 Rpt: 253/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pate, Teri <hr/> 6 Contributor address; City; State; Zip Code Hurst, TX 76053	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia, Elliot <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Barron <hr/> Contributor address; City; State; Zip Code Nashville, TN 37205	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Vanderbilt University Medical Center
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulsen, Douglas <hr/> Contributor address; City; State; Zip Code Liberty Hill, TX 78642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peebles, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/374 Rpt: 254/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pequeno, Lisa <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Sped Teacher		9 Employer (See Instructions) GPISD
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Inspector		Employer (See Instructions) City of Pasadena
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Dr. Frank G <hr/> Contributor address; City; State; Zip Code El Paso, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) U of Texas - El Paso
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Dennis <hr/> Contributor address; City; State; Zip Code Temple, TX 76502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkison, Patricia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/374 Rpt: 255/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petelle, Rose <hr/> 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter, Karen <hr/> Contributor address; City; State; Zip Code Chula Vista, CA 91913	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) American Airlines
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Jonathan <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) American Airlines
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Bill <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75077	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pea, Diana <hr/> Contributor address; City; State; Zip Code Huntington Park, CA 90255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/374 Rpt: 256/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pea, Diana <hr/> 6 Contributor address; City; State; Zip Code Huntington Park, CA 90255	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pea, Diana <hr/> Contributor address; City; State; Zip Code Huntington Park, CA 90255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pea, Diana <hr/> Contributor address; City; State; Zip Code Huntington Park, CA 90255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfeifer, Sally <hr/> Contributor address; City; State; Zip Code Bend, OR 97703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Pfeifer and associates
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfiester, Nancy <hr/> Contributor address; City; State; Zip Code Harker Heights, TX 76548	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/374 Rpt: 257/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfiester, R E <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90039	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philips, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Hardy Solutions LLC
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pichel, Gerhard <hr/> Contributor address; City; State; Zip Code Pacific Palisades, CA 90272	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pilgreen, Jeffrey <hr/> Contributor address; City; State; Zip Code Stafford, VA 22554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) USG
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PinAli, robert <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.05
Principal occupation / Job title (See Instructions) courier		Employer (See Instructions) Bob PinAli

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/374 Rpt: 258/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinali, robert <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) courier		9 Employer (See Instructions) Bob Pinali
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pine, Barbara <hr/> Contributor address; City; State; Zip Code Derby Line, VT 05830	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSA		Employer (See Instructions) Federal government
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/374 Rpt: 259/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Janis W <hr/> Contributor address; City; State; Zip Code Austin, TX 78763	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) J Pinnelli Company LLC
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piper, Sally M <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pique, Lynn <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/374 Rpt: 260/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzo Gabriel, Maria <hr/> 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Hyde Oil Gas
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plassmann, Charles <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poelma, Chris <hr/> Contributor address; City; State; Zip Code Wichita, KS 67214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polk, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) DOUG POLK LLC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poludniak, Lucille <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/374 Rpt: 261/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pomeroy, Emily <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Front desk		9 Employer (See Instructions) Hair salon
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Kathy <hr/> Contributor address; City; State; Zip Code Henderson, TX 75654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Kathy <hr/> Contributor address; City; State; Zip Code Henderson, TX 75654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portillo, Chico <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portillo, Chico <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/374 Rpt: 262/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Toni <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79938	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prager III PHD, Herman <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Adjunct professor of government		Employer (See Instructions) Austin community college
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prange, Bill <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prange, Bill <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prange, Bill <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/374 Rpt: 263/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prange, Bill <hr/> 6 Contributor address; City; State; Zip Code Lincoln, NE 68510	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prange, Bill <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Present, Zach <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Prospice Investment
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pressgrove, Cheryl <hr/> Contributor address; City; State; Zip Code Vanleer, TN 37181	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pressgrove, Cheryl <hr/> Contributor address; City; State; Zip Code Vanleer, TN 37181	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/374 Rpt: 264/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Danny <hr/> 6 Contributor address; City; State; Zip Code Panama City Beach, FL 32407	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Denise <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, David Skywalker <hr/> Contributor address; City; State; Zip Code Columbus, OH 43206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare Manager		Employer (See Instructions) OhioHealth
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pujol, Ophelia L <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pujol, Ophelia L <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/374 Rpt: 265/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pujol, Ophelia L <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaintance, Don <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Graphic Design		Employer (See Instructions) Public Address
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaintance, Don <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Graphic Design		Employer (See Instructions) Public Address
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quick, Lynn <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintanilla, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Vivicare Health Partners

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/374 Rpt: 266/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, KRISTIN <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragona, Jeffrey <hr/> Contributor address; City; State; Zip Code Manor, TX 78653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Carol <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainosek, Jerilyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramachandran, Kari <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OT		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/374 Rpt: 267/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramachandran, Kari	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78759		
8 Principal occupation / Job title (See Instructions) OT		9 Employer (See Instructions) Self
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Claudia	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Devine, TX 78016		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Claudia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Devine, TX 78016		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Joe	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sacramento, CA 95831		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/374 Rpt: 268/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos-Arpero, Jos	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code El Paso, TX 79934		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsley, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsley, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsley, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsley, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/374 Rpt: 269/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Barbara <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranalli, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental Engineer		Employer (See Instructions) MRMC
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratley, Cheryl <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Becky <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raycraft, Camille <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/374 Rpt: 270/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raycraft, Camille <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayner, Antionette <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayner, Antionette <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaney, Billie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaney, Billie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/374 Rpt: 271/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reap, Marianne	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) RRISD PIEF
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reedholm, Joel	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reems, Holly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Humble, TX 77346		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reems, Holly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Humble, TX 77346		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeser, Rose	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code West Lake Hills, TX 78746		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/374 Rpt: 272/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rehm, Patricia <hr/> 6 Contributor address; City; State; Zip Code Salado, TX 76571	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rehm, Patricia <hr/> Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rehm, Patricia <hr/> Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Jackie <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Swim Instructor		Employer (See Instructions) YMCA
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Jackie <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Swim Instructor		Employer (See Instructions) YMCA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/374 Rpt: 273/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Jackie <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Swim Instructor		9 Employer (See Instructions) YMCA
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Jackie <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Swim Instructor		Employer (See Instructions) YMCA
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reingold, Steve <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinken, Janis <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinken, Janis <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/374 Rpt: 274/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renard, Anita <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resendez, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resendez, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revelo, Aristides <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Hernan <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/374 Rpt: 275/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Laurie <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Mario <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Omnitracs
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Mario <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Omnitracs
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Mario <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Omnitracs
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Martha <hr/> Contributor address; City; State; Zip Code El Paso, TX 79907	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/374 Rpt: 276/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78733	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) self
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, John <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/374 Rpt: 277/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Sharyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/374 Rpt: 278/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Susan <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77450	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Susan <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Susan <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Susan <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Joanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/374 Rpt: 279/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Jane <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) scientist		9 Employer (See Instructions) Duke University
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Pat <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/374 Rpt: 280/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickel, Pamela <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) 98th Meridian Real Estate Sales
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rider, Kathy T <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riemann, Janice <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legal Secretary		Employer (See Instructions) Baker Botts L.L.P.
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riklin, Seth <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Hill Country Wind Power LP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/374 Rpt: 281/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Michaelyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Unspecified
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ripple, Lanier <hr/> Contributor address; City; State; Zip Code Houston, TX 77043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Salesforce
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Orlando <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Federal Employee
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Orlando <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Federal Employee
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Dennis I <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/374 Rpt: 282/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Lori <hr/> 6 Contributor address; City; State; Zip Code Clarendon, TX 79226	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TxDot Safety Rest Area Maintenance		9 Employer (See Instructions) WSC Work Services Corporation
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocchio, Laura <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Judith <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Judith <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodman, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rodman Law Office

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/374 Rpt: 283/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> 6 Contributor address; City; State; Zip Code Midlothian, TX 76065	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> Contributor address; City; State; Zip Code Midlothian, TX 76065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Elsa <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) HHSC
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Elsa <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) HHSC
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Elsa <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) HHSC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/374 Rpt: 284/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Elsa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Financial Analyst		9 Employer (See Instructions) HHSC
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Stephanie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Presbyterian Seminary
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/374 Rpt: 285/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, William <hr/> Contributor address; City; State; Zip Code Wharton, NJ 07885	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) College administrator		Employer (See Instructions) Drew University
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohrbach, Kermit J <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/374 Rpt: 286/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronderos, Stephen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Atlassian
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Root, Travis <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Boeing
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Root, Travis <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosato, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78763	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Southwest Strategies Group Inc
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Leilani <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/374 Rpt: 287/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, David <hr/> 6 Contributor address; City; State; Zip Code Northbrook, IL 60062	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) dentist		9 Employer (See Instructions) self
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossetto, Mindy <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotondi, Franco <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotondi, Franco <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rouse, L. Beatrice <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/374 Rpt: 288/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowan, Patricia	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78759		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowan, Patricia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Patricia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) IT Engineer		Employer (See Instructions) AT&T
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Patricia	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) IT Engineer		Employer (See Instructions) AT&T
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Patricia	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) IT Engineer		Employer (See Instructions) AT&T

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/374 Rpt: 289/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowold-Brown, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruckriegel, Kara Lee <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruckriegel, Kara Lee <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruckriegel, Kara Lee <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruckriegel, Kara Lee <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/374 Rpt: 290/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Michelina <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Fran <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Lauri <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Ascension
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Mary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) businesswoman		Employer (See Instructions) self
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Patricia <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/374 Rpt: 291/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Patricia <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Patricia <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Patricia <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/374 Rpt: 292/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/374 Rpt: 293/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Zo <hr/> Contributor address; City; State; Zip Code Seattle, WA 98122	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S Jung, Brian <hr/> Contributor address; City; State; Zip Code La Mirada, CA 90638	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mgmt Analyst		Employer (See Instructions) Los Angeles City

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/374 Rpt: 294/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S., Mary	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78723		
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions) Google
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Hector	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Hector	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Velia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code San Antonio, TX 78228		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Velia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Antonio, TX 78228		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/374 Rpt: 295/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sakamoto, Yuki <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97239	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Pharmacy Tech		9 Employer (See Instructions) OHSU
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Ginni <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sams, Bobby <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
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#: _____) Sanders, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarg, Jean <hr/> Contributor address; City; State; Zip Code Dover, DE 19904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/374 Rpt: 296/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarosdy, Randall <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sasaridis, Judith <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saval, Maureen <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scales, WILLIE <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schafer, Margaret <hr/> Contributor address; City; State; Zip Code Houston, TX 77082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/374 Rpt: 297/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Kendra <hr/> 6 Contributor address; City; State; Zip Code Rockville, MD 20852	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Kendra <hr/> Contributor address; City; State; Zip Code Rockville, MD 20852	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schendel, Lynne <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter, Kay <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter, Susan <hr/> Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/374 Rpt: 298/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Erin <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Blue house preschool
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwarz, Ben <hr/> Contributor address; City; State; Zip Code Seattle, WA 98108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) Wunderman Thompson
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seekely, Bob & Gabrielle <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA / Mgmt Consultant		Employer (See Instructions) EPM Associates LLC
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeley, Elinor <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) GISD
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segovia, Brandi <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 296/374 Rpt: 299/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segovia, Brandi <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79707	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selby, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selby, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sesline, David <hr/> Contributor address; City; State; Zip Code Davis, CA 95616	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sesline, David <hr/> Contributor address; City; State; Zip Code Davis, CA 95616	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 297/374 Rpt: 300/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sever, Ann <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sever, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shadowz, Raven <hr/> Contributor address; City; State; Zip Code Pueblo, CO 81004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shadowz, Raven <hr/> Contributor address; City; State; Zip Code Pueblo, CO 81004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shahriari, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 298/374 Rpt: 301/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheedy, Charlotte <hr/> 6 Contributor address; City; State; Zip Code Hudson, NY 12534	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheedy, Charlotte <hr/> Contributor address; City; State; Zip Code Hudson, NY 12534	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Julianne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) tryitr
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Julianne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) tryitr
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Julianne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) tryitr

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 299/374 Rpt: 302/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Julianne <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) tryitr
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Julianne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) tryitr
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiple, George <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ceo		Employer (See Instructions) Shiple&AssociatesInc.
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiple, George <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Shiple &Associates<Inc
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Carolyn <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 300/374 Rpt: 303/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Carolyn 6 Contributor address; City; State; Zip Code Lexington, TX 78947	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Carolyn Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Carolyn Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shisler, Michael Contributor address; City; State; Zip Code Saint Leonard, MD 20685	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 301/374 Rpt: 304/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siebert, Mike <hr/> 6 Contributor address; City; State; Zip Code Eastland, TX 76448	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Raeden
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifford, Derek <hr/> Contributor address; City; State; Zip Code Shelby Township, MI 48316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Rippling
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simms, Howard <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Rose <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 302/374 Rpt: 305/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sireno, Clea <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77591	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisco, Dana <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Center for Brain Health
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisco, Dana <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Center for Brain Health
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisco, Dana <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Assistant Director		Employer (See Instructions) Center for Brain Health
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skjonsby, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) dyslexia therapist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 303/374 Rpt: 306/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Anita <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Brandon <hr/> Contributor address; City; State; Zip Code Palatine, IL 60074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Candy <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David C <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) United Way for Greater Austin
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elizabeth <hr/> Contributor address; City; State; Zip Code Eagle Mountain, UT 84005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions) Salt & Honey Market

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 304/374 Rpt: 307/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jami <hr/> 6 Contributor address; City; State; Zip Code Little Rock, AR 72212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Medical City Plano
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Janice <hr/> Contributor address; City; State; Zip Code Arlington, TX 76014	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 305/374 Rpt: 308/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marie	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78628		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Software Sales		Employer (See Instructions) Salient syste
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Software Sales		Employer (See Instructions) Salient syste
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Software Sales		Employer (See Instructions) Salient syste
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75208		
Principal occupation / Job title (See Instructions) Software Sales		Employer (See Instructions) SAlient syste

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 306/374 Rpt: 309/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75208	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Sales		9 Employer (See Instructions) SAlent system
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stacy <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Chevron
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Steven <hr/> Contributor address; City; State; Zip Code Marshfield, MO 06570	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Susan <hr/> Contributor address; City; State; Zip Code Flint, MI 48503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, T. Randall <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired United Methodist Pastor		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 307/374 Rpt: 310/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snodgrass, Cathy <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) substitute teacher		9 Employer (See Instructions) GCISD
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snodgrass, Cathy <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) substitute teacher		Employer (See Instructions) GCISD
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snodgrass, Cathy <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) substitute teacher		Employer (See Instructions) GCISD
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snodgrass, Cathy <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) substitute teacher		Employer (See Instructions) GCISD
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Douglas <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Voter File Manager		Employer (See Instructions) New York Democratic Party

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 308/374 Rpt: 311/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Douglas <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Voter File Manager		9 Employer (See Instructions) New York Democratic Party
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Douglas <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Voter File Manager		Employer (See Instructions) New York Democratic Party
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Douglas <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Voter File Manager		Employer (See Instructions) New York Democratic Party
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmundson, Jeff <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sr Media Planner Buyer		Employer (See Instructions) HMS
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 309/374 Rpt: 312/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Guadalupe <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparrow, Julie <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 310/374 Rpt: 313/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparrow, Julie <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78504	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparrow, Julie <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) self
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speer, Richard <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78460	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spence, William <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IS Security Analyst		Employer (See Instructions) Cedar Park Regional Medical Center
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, April <hr/> Contributor address; City; State; Zip Code Waterville, ME 04901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) windsor elementary school

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 311/374 Rpt: 314/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spock, Heidi <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Aging life care manager		9 Employer (See Instructions) Self employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spuhler, Don <hr/> Contributor address; City; State; Zip Code Fontana, CA 92336	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Standridge, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Speech pathologist		Employer (See Instructions) University of Texas
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stansbury, Dennis <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Dennis Stansbury
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, Edith <hr/> Contributor address; City; State; Zip Code Brady, TX 76825	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 312/374 Rpt: 315/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Penny <hr/> 6 Contributor address; City; State; Zip Code Wolfe City, TX 75496	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starry, Steffani <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavely, Roberta <hr/> Contributor address; City; State; Zip Code Point, TX 75472	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steeper, Paula <hr/> Contributor address; City; State; Zip Code Arcadia, CA 91006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stehle, Maria <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226	Amount of Contribution (\$) \$5.00
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: 313/374 Rpt: 316/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, Dori <hr/> 6 Contributor address; City; State; Zip Code Lanai City, HI 96763	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Patty <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling-lewis, Javoszia <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Childrens Health Hospitals
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Chrissy <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Library Services		Employer (See Instructions) APTS
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Christine <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Library Services Specialist		Employer (See Instructions) Austin Seminary

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 314/374 Rpt: 317/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Christine <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Library Services SpeciAlist		9 Employer (See Instructions) Austin Seminary
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Mike <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson Jr, Peter <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steward, Clay <hr/> Contributor address; City; State; Zip Code Wayne, MI 48184	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Tool and Die maker		Employer (See Instructions) Stellantis
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 315/374 Rpt: 318/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoddard, Mark <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoddard, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoddard, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoddard, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoltz, Suzanne <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 316/374 Rpt: 319/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Cindy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) writer/publisher		9 Employer (See Instructions) self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Cindy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Kathryn Suzanne <hr/> Contributor address; City; State; Zip Code Middlebury, VT 05753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Mary <hr/> Contributor address; City; State; Zip Code Lyme, CT 06371	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Richard <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Consultant		Employer (See Instructions) RTS Connect LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 317/374 Rpt: 320/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Richard 6 Contributor address; City; State; Zip Code Taylor, TX 76574	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Principal Consultant		9 Employer (See Instructions) RTS Connect LLC
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Richard Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Consultant		Employer (See Instructions) RTS Connect LLC
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Richard Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal Consultant		Employer (See Instructions) RTS Connect LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storie, Tracie Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storie, Tracie Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 318/374 Rpt: 321/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storie, Tracie <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storie, Tracie <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stubbs, Luci <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lab scientist		Employer (See Instructions) BRLI
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) The University of Texas at Austin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 319/374 Rpt: 322/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Research Associate		9 Employer (See Instructions) The University of Texas at Austin
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundquist, Jan <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swank, Shannon <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Klein ISD
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swingholm, Evan <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swingholm, Evan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 320/374 Rpt: 323/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Switek, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) AISD
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T, Dean <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taeger, Barbara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Piano teacher		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talbot, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talbot, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 321/374 Rpt: 324/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarbox, Christina <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) DMAC
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 322/374 Rpt: 325/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, John <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Principal & Founder		Employer (See Instructions) White Oak Road LLC
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, William E <hr/> Contributor address; City; State; Zip Code Gilmer, TX 75644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teague, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teague, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 323/374 Rpt: 326/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Jo Karr <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75709	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teinert, Carl <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) BBA Engineering
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 324/374 Rpt: 327/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Maritza <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77449	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Cashier/Sales associate		9 Employer (See Instructions) Briar Groove Pharmacy
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tester, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Event Manager (contractor)		Employer (See Instructions) Jennifer Tester
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teter, Rick <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Optometric PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
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: 325/374 Rpt: 328/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Heather <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90402	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Lynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Medical Transcriptionist		Employer (See Instructions) Verbatim Transcription
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.23
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.23
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.23
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 326/374 Rpt: 329/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$10.23
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert L <hr/> Contributor address; City; State; Zip Code Morris, NY 13808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 327/374 Rpt: 330/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 328/374 Rpt: 331/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison+E83	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Denis	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78705		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) University of Texas at Austin
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Judith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Asheville, NC 28805		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Throop, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78726		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tieken, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Henderson, TX 75652		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 329/374 Rpt: 332/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilley, Frank <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76109	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Corporate Finance Consultant		9 Employer (See Instructions) SeatonHill
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindall, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) goTransverse
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindall, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) goTransverse
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindall, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) goTransverse
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinkle, Jeanie <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 330/374 Rpt: 333/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tissing, Maria <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Leslie <hr/> Contributor address; City; State; Zip Code Greenville, TX 75402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Jeweler		Employer (See Instructions) Self
Date 07/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomotaki, Cynthia <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Plano ISD
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torjussen, George <hr/> Contributor address; City; State; Zip Code Galloway, NJ 08205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Charlie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 331/374 Rpt: 334/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tower, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townasley, Anna <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Jeff <hr/> Contributor address; City; State; Zip Code Bartonville, TX 76226	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Patricia <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Roberto <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 332/374 Rpt: 335/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Roberto <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trowbridge, Cynthia <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Valeria <hr/> Contributor address; City; State; Zip Code New Bern, NC 28562	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Valeria <hr/> Contributor address; City; State; Zip Code New Bern, NC 28562	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$527.21
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 333/374 Rpt: 336/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$527.21
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$527.21
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$557.21
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tunstill, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$527.21
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 334/374 Rpt: 337/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Christie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Dallas, TX 75234		
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) JLL
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Elton	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Julie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Montgomery, AL 36117		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turpin, Vernita	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Waco, TX 76712		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhl, Scott	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Grapevine, TX 76051		
Principal occupation / Job title (See Instructions) Senior Partner		Employer (See Instructions) RCP Alera Group, LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 335/374 Rpt: 338/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uresti, Daniel	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78204		
8 Principal occupation / Job title (See Instructions) Officer		9 Employer (See Instructions) US Military
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ussher, Brian	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ussher, Brian	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ussher, Brian	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77024		
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#: _____) Utter, Mischell	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 336/374 Rpt: 339/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Marcos <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Program manager		9 Employer (See Instructions) Zapier
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van, David <hr/> Contributor address; City; State; Zip Code Tampa, FL 33625	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) BayCare
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHornHarris, Mary Frances <hr/> Contributor address; City; State; Zip Code Cantonment, FL 32533	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanPelt, Vicki <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) self-employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vander Straten, David <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Health Services

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 337/374 Rpt: 340/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varljen, Nancy	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78628		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Deloise	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vazquez, Pedro	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Las Vegas, NV 89113		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Linktech
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Venable, Rochele	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) CFBISD
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verell, Heather	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rockwall, TX 75032		
Principal occupation / Job title (See Instructions) Radiology		Employer (See Instructions) Methodist Health System

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 338/374 Rpt: 341/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villere, Genee <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volz, Candace <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions) Volz & Associates Inc.
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von der Gruen, Jennifer <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vovk, Jane <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 339/374 Rpt: 342/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code San Angelo, TX 76903		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Angelo, TX 76903		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Angelo, TX 76903		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Angelo, TX 76903		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Angelo, TX 76903		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 340/374 Rpt: 343/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76903	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, MICHAEL <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Adjunct Professor		Employer (See Instructions) Lone Star College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 341/374 Rpt: 344/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Elise	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Elise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Elise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Elise	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Iris	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richmond, TX 77469		
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: 342/374 Rpt: 345/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Melissa <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10044	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Court Analyst		9 Employer (See Instructions) State of New York
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadzeck, Reeta <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadzeck, Reeta <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagman, Marcy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wagman Dickman LLC
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 343/374 Rpt: 346/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Anne	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Nathaniel J	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Vickie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Bedford, TX 76021		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Vickie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Bedford, TX 76021		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warden, John R	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 344/374 Rpt: 347/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Betty <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warton, Angela <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT Buyer		Employer (See Instructions) McKesson
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Joe B <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Patricia <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watt, Catherine <hr/> Contributor address; City; State; Zip Code Riverside, CA 92507	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) UC Riverside

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 345/374 Rpt: 348/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 346/374 Rpt: 349/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Carol <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, David <hr/> Contributor address; City; State; Zip Code Keller, TX 76262	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, David <hr/> Contributor address; City; State; Zip Code Keller, TX 76262	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, David <hr/> Contributor address; City; State; Zip Code Keller, TX 76262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 347/374 Rpt: 350/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Way, Suzanne	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Melbourne, FL 32940		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Martha	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Las Cruces, NM 88011		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Gail	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Grover Beach, CA 93433		
Principal occupation / Job title (See Instructions) Sole Proprietor		Employer (See Instructions) Self
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webberman, Amy	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks, Rebecca	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code Las Vegas, NV 89156		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Clark County Schools

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 348/374 Rpt: 351/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weidmann, Kim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinfeld, Michael <hr/> Contributor address; City; State; Zip Code Pikesville, MD 21208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Linda <hr/> Contributor address; City; State; Zip Code Sumas, WA 98295	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welsh, Amber <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 349/374 Rpt: 352/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wescott, Trish <hr/> 6 Contributor address; City; State; Zip Code Bluffton, SC 29910	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Church
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wescott, Trish <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Church
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesner, Paul <hr/> Contributor address; City; State; Zip Code Delaware, OH 43015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Rhonda <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 350/374 Rpt: 353/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerlund, Trina <hr/> 6 Contributor address; City; State; Zip Code Bellevue, WA 98004	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerlund, Trina <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerlund, Trina <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerlund, Trina <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whellan, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Armbrust & Brown PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 351/374 Rpt: 354/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whistler, Teresa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Judith <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> Contributor address; City; State; Zip Code Madison, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finisher		Employer (See Instructions) Bob's Copy Shop

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 352/374 Rpt: 355/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53713	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Finisher		9 Employer (See Instructions) Bob's Copy Shop
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> Contributor address; City; State; Zip Code Madison, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finisher		Employer (See Instructions) Bob's Copy Shop
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> Contributor address; City; State; Zip Code Madison, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finisher		Employer (See Instructions) Bob's Copy Shop
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> Contributor address; City; State; Zip Code Madison, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finisher		Employer (See Instructions) Bob's Copy Shop
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> Contributor address; City; State; Zip Code Madison, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finisher		Employer (See Instructions) Bob's Copy Shop

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 353/374 Rpt: 356/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiterabbit, Herman <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53713	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Finisher		9 Employer (See Instructions) Bob's Copy Shop
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley George, Aimee <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley George, Aimee <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 354/374 Rpt: 357/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Legal Services Center
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiechnicki, Katherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wightman, Jasmine <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) TASB

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 355/374 Rpt: 358/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikse, Steven <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willatt, Karen <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Harris Health System
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Crystal <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) Vocovision
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lana <hr/> Contributor address; City; State; Zip Code Germantown, MD 20876	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative assistant		Employer (See Instructions) Lockheed Martin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 356/374 Rpt: 359/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lana <hr/> 6 Contributor address; City; State; Zip Code Germantown, MD 20876	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Administrative assistant		9 Employer (See Instructions) Lockheed Martin
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lana <hr/> Contributor address; City; State; Zip Code Germantown, MD 20876	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative assistant		Employer (See Instructions) Lockheed Martin
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lana <hr/> Contributor address; City; State; Zip Code Germantown, MD 20876	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative assistant		Employer (See Instructions) Lockheed Martin
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lana <hr/> Contributor address; City; State; Zip Code Germantown, MD 20876	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative assistant		Employer (See Instructions) Lockheed Martin
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Linda <hr/> Contributor address; City; State; Zip Code Garland, TX 75041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 357/374 Rpt: 360/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Linda	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Garland, TX 75041		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mark	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78703		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Pieter	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78702		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Graves Dougherty Hearon & Moody PC
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Roger	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Colleyville, TX 76034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Barbara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Iowa Colony, TX 77583		
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: 358/374 Rpt: 361/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Barbara <hr/> 6 Contributor address; City; State; Zip Code Iowa Colony, TX 77583	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jan <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jan <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 359/374 Rpt: 362/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 360/374 Rpt: 363/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Robert <hr/> 6 Contributor address; City; State; Zip Code Llano, TX 78643	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Llano ISD
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Stephen <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) nurseryman		Employer (See Instructions) self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Wylie ISD
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Wylie ISD
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Wylie ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 361/374 Rpt: 364/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) Wylie ISD
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Wylie ISD
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sue <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Wylie ISD
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 362/374 Rpt: 365/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Spring, TX 77393		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Spring, TX 77393		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Spring, TX 77393		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Spring, TX 77393		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Spring, TX 77393		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 363/374 Rpt: 366/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkelman, Marc	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code West Lake Hills, TX 78746		
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Go! Retail Group
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winner, Langdon	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Brunswick, ME 04011		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winschief, Justin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78753		
Principal occupation / Job title (See Instructions) Network Engineer		Employer (See Instructions) AT&T
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Peggy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75229		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Gateway of Grace
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woestman, Thomas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Integration Engineer		Employer (See Instructions) Esri

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 364/374 Rpt: 367/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woestman, Thomas <hr/> 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Integration Engineer		9 Employer (See Instructions) Esri
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woestman, Thomas <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Integration Engineer		Employer (See Instructions) Esri
Date 07/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woestman, Thomas <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Integration Engineer		Employer (See Instructions) Esri
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Charles <hr/> Contributor address; City; State; Zip Code Livingston, TX 77399	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Yvonne <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 365/374 Rpt: 368/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Kathy <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Leander ISD
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Kathy <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Leander ISD
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodall, MaryLynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodall, MaryLynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodall, MaryLynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 366/374 Rpt: 369/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Mary <hr/> 6 Contributor address; City; State; Zip Code Desoto, TX 75115	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Owen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Owen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Owen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Owen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 367/374 Rpt: 370/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodruff, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Self
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Deanna <hr/> Contributor address; City; State; Zip Code Portland, OR 97217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Deanna <hr/> Contributor address; City; State; Zip Code Portland, OR 97217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Self
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Deanna <hr/> Contributor address; City; State; Zip Code Portland, OR 97217	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Self
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodworth, Margo <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 368/374 Rpt: 371/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worst, Nancy <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worst, Nancy <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wrather, Lauren <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) UT Austin
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Watson <hr/> Contributor address; City; State; Zip Code Humble, TX 77396	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Hisd
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wukasch, Susan <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 369/374 Rpt: 372/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wurgler, Steven <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78223	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wylie, Jonathan <hr/> Contributor address; City; State; Zip Code Detroit, MI 48226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yackle, Cris <hr/> Contributor address; City; State; Zip Code Eureka Springs, AR 72632	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yackle, Cris <hr/> Contributor address; City; State; Zip Code Eureka Springs, AR 72632	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yackle, Cris <hr/> Contributor address; City; State; Zip Code Eureka Springs, AR 72632	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 370/374 Rpt: 373/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yackle, Cris <hr/> 6 Contributor address; City; State; Zip Code Eureka Springs, AR 72632	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Not Employed
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) venture capital		Employer (See Instructions) Origin Partners
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) venture capital		Employer (See Instructions) Origin Partners
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yaudes, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yaudes, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 371/374 Rpt: 374/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yin, Yabei <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) educator		9 Employer (See Instructions) HISD
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Keith <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) investor		Employer (See Instructions) Quadrant Capital
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 372/374 Rpt: 375/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngbluth, Christopher <hr/> 6 Contributor address; City; State; Zip Code Yorktown, VA 23692	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) None
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Seton
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 373/374 Rpt: 376/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zabriskie, Michelle <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zenuch, Jennifer <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Industrial Hygienist		Employer (See Instructions) GSA
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bruce <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Dalio Family Office

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 374/374 Rpt: 377/416
2 FILER NAME Talarico, James (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Xenia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Aldine isd
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zurkammer, Jackie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Patient Rep		Employer (See Instructions) American cancer society
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zurkammer, Jackie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patient Rep		Employer (See Instructions) American cancer society
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuteck, Pamela R <hr/> Contributor address; City; State; Zip Code Clear Lake Shores, TX 77565	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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: 1/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/12/2023	5 Payee name Adobe	
6 Amount (\$) \$59.53	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/14/2023	Payee name Adobe	
Amount (\$) \$59.53	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/12/2023	Payee name Adobe	
Amount (\$) \$59.53	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/12/2023	5 Payee name Adobe	
6 Amount (\$) \$59.53	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/13/2023	Payee name Adobe	
Amount (\$) \$59.53	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/12/2023	Payee name Adobe	
Amount (\$) \$64.94	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110-2704	
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
	9 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: 3/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 07/14/2023	5 Payee name Amazon
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6 Amount (\$) \$837.58	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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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 Photography Supplies
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Amazon
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Amount (\$) \$36.72	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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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 Photography Supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/24/2023	Payee name Amazon
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Amount (\$) \$32.46	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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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 Photography Supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/23/2023	5 Payee name Amazon	
6 Amount (\$) \$18.38	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Atkins, Grace	
Amount (\$) \$680.00	Payee address; City; State; Zip Code 5400 N. Lamar Blvd. Apt 2023 Austin, TX 78751	
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 Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Austin AFL-CIO	
Amount (\$) \$108.00	Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day Ad
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: 5/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/13/2023	5 Payee name B&H Photo	
6 Amount (\$) \$1,189.67	7 Payee address; City; State; Zip Code 420 Ninth Avenue New York, NY 10001	
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 Photography
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2023	Payee name Best Buy	
Amount (\$) \$2,164.99	Payee address; City; State; Zip Code 7601 Penn Avenue, South Richfield, MN 55423	
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 Photography Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2023	Payee name Best Buy	
Amount (\$) \$32.46	Payee address; City; State; Zip Code 7601 Penn Avenue, South Richfield, MN 55423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <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: 6/39 Rpt:	2	FILER NAME Talarico, James (The Honorable)	3	Filer ID (Ethics Commission Filers) 00081913	
4	Date 08/01/2023	5	Payee name Bhalla, Rachel			
6	Amount (\$) \$280.00	7	Payee address; City; State; Zip Code 128 Second Ave Apt B1 Manhattan, NY 10003			
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 Payroll			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 09/07/2023		Payee name Bhalla, Rachel			
	Amount (\$) \$100.00		Payee address; City; State; Zip Code 128 Second Ave Apt B1 Manhattan, NY 10003			
	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 Payroll			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 07/07/2023		Payee name Blue State Digital			
	Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 3 World Trade Center, 30th Floor 175 Greenwich St. New York, NY 10007			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Consulting			
		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: 7/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 09/21/2023	5 Payee name Blue State Digital	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 175 Greenwich Street 16th Floor New York, NY 10007	
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 Digital Consultants
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Blue State Digital	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 175 Greenwich Street 16th Floor New York, NY 10007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2023	Payee name Blue State Digital	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 175 Greenwich Street 16th Floor New York, NY 10007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Ads
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: 8/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/11/2023	5 Payee name Bumperactive	
6 Amount (\$) \$1,087.91	7 Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757	
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 Merchandise
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Capital Area Progressive Democrats	
Amount (\$) \$275.00	Payee address; City; State; Zip Code P.O. Box 413 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2023	Payee name Check Mark Typsetting	
Amount (\$) \$827.61	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78722	
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 Merchandise
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: 9/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 10/30/2023	5 Payee name Chris Hollins Campaign
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6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code P.O. Box 56386 Houston, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/25/2023	Payee name Crown Awards
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Amount (\$) \$34.67	Payee address; City; State; Zip Code 9 Skyline Drive Hawthorne, NY 10532
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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 Staff Recognition
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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 10/26/2023	Payee name Doordash
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Amount (\$) \$68.08	Payee address; City; State; Zip Code 303 2nd Street Suite 800 San Francisco, CA 94107
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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 Team lunch
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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: 10/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 07/17/2023	5 Payee name Dropbox	
6 Amount (\$) \$12.78	7 Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158	
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 Online Storage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/15/2023	Payee name Dropbox	
Amount (\$) \$12.78	Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158	
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 Online Storage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/03/2023	Payee name Esparza, Antonio	
Amount (\$) \$2,100.00	Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
	9 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: 11/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/01/2023	5 Payee name Esparza, Antonio	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2023	Payee name Esparza, Antonio	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Esparza, Antonio	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
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: 12/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/07/2023	5 Payee name Esparza, Antonio	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Esparza, Antonio	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 14912 Alpha Collier Dr. Austin, TX 78728	
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 Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Fedex	
Amount (\$) \$168.92	Payee address; City; State; Zip Code 942 S Shady Grove Rd Memphis, TN 38120	
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 Mail
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: 13/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 10/02/2023	5 Payee name Fedex
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6 Amount (\$) \$12.96	7 Payee address; City; State; Zip Code 942 S Shady Grove Rd Memphis, TN 38120
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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 Mail
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Google
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Amount (\$) \$128.77	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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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 Google Storage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Google
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Amount (\$) \$127.92	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351
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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 Google Storage
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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: 14/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913			
4 Date 09/01/2023	5 Payee name Google				
6 Amount (\$) \$124.20	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351				
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 Google Storage			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/02/2023	Payee name Google				
Amount (\$) \$115.13	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351				
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 Google Storage			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 11/01/2023	Payee name Google				
Amount (\$) \$115.13	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351				
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 Google Storage			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
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: 15/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Payee name Google	
6 Amount (\$) \$115.13	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
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 Google Storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2023	Payee name Ground Game Texas	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 310 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2023	Payee name Harry & David	
Amount (\$) \$100.63	Payee address; City; State; Zip Code 2500 S PACIFIC HWY Medford, OR 97501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Fundraiser Gift
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 08/01/2023	5 Payee name Hill Country Springs
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6 Amount (\$) \$27.90	7 Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747
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8 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 Office water cooler
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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 09/01/2023	Payee name Hill Country Springs
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Amount (\$) \$15.90	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747
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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 Office water cooler
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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 10/03/2023	Payee name Hill Country Springs
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Amount (\$) \$8.66	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747
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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 Office water cooler
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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: 17/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 11/01/2023	5 Payee name Hill Country Springs
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6 Amount (\$) \$8.66	7 Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747
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8 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 Office water cooler
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name Hill Country Springs
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Amount (\$) \$38.40	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747
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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 Office water cooler
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Hinojosa, Gina
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751
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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 Payroll
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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 | 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 |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/01/2023	5 Payee name Hinojosa, Gina	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751	
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 Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2023	Payee name Hinojosa, Gina	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751	
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 Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Hinojosa, Gina	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751	
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 Payroll
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: 19/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 11/07/2023	5 Payee name Hinojosa, Gina	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751	
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 Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Hinojosa, Gina	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 4311 Avenue A Austin, TX 78751	
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 Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Intuit Quickbooks	
Amount (\$) \$138.58	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Payroll Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 08/03/2023	5 Payee name Intuit Quickbooks	
6 Amount (\$) \$156.70	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Payroll Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2023	Payee name Intuit Quickbooks	
Amount (\$) \$156.70	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Payroll Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2023	Payee name Intuit Quickbooks	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Payroll Software
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: 21/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 11/03/2023	5 Payee name Intuit Quickbooks
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6 Amount (\$) \$79.95	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043
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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 Payroll Software
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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 12/04/2023	Payee name Intuit Quickbooks
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Amount (\$) \$79.95	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Software
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/30/2023	Payee name Julie Johnson for Congress
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 802765 Dallas, TX 75380
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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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: 22/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 07/03/2023	5 Payee name Krasne, Seth
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6 Amount (\$) \$1,300.00	7 Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752
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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 Payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Krasne, Seth
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752
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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 Payroll
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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 12/01/2023	Payee name Krasne, Seth
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Amount (\$) \$400.00	Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752
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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 Payroll
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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: 23/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/02/2023	5 Payee name Krasne, Seth	
6 Amount (\$) \$510.38	7 Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Reimbursement (Thank You Note Mailing Supplies)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Krasne, Seth	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752	
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 Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Krasne, Seth	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752	
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 Payroll
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: 24/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 09/01/2023	5 Payee name Krasne, Seth
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6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 609 Clayton Lane Apt 305 Austin, TX 78752
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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 Payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/26/2023	Payee name Legislative Solutions
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Amount (\$) \$350.00	Payee address; City; State; Zip Code 807 Brazos St #714 Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Blast
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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 Liberal Austin Democrats
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Amount (\$) \$500.00	Payee address; City; State; Zip Code Post Office Box 49712 Austin, TX 78765
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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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: 25/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/03/2023	5 Payee name Mothers Against Greg Abbott	
6 Amount (\$) \$1,216.50	7 Payee address; City; State; Zip Code PO Box 27881 Austin, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Mt Calvary Baptist Church	
Amount (\$) \$287.94	Payee address; City; State; Zip Code 602 Symes St Taylor, TX 76574	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Summer Youth Field Trip Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name NGPVAN	
Amount (\$) \$1,758.90	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
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: 26/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 07/03/2023	5 Payee name NGPVAN
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6 Amount (\$) \$105.00	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2023	Payee name NGPVAN
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Amount (\$) \$105.00	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) Solicitation/Fundraising 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/03/2023	Payee name NGPVAN
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Amount (\$) \$1,758.90	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) Solicitation/Fundraising 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 <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: 27/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 09/05/2023	5 Payee name NGPVAN
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6 Amount (\$) \$1,758.90	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name NGPVAN
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Amount (\$) \$105.00	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) Solicitation/Fundraising 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 10/02/2023	Payee name NGPVAN
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Amount (\$) \$105.00	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) Solicitation/Fundraising 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
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: 28/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/03/2023	5 Payee name NGPVAN	
6 Amount (\$) \$1,758.90	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name NGPVAN	
Amount (\$) \$105.00	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name NGPVAN	
Amount (\$) \$1,758.90	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/04/2023	5 Payee name NGPVAN	
6 Amount (\$) \$105.00	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name NGPVAN	
Amount (\$) \$1,758.90	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2023	Payee name Office Depot	
Amount (\$) \$67.10	Payee address; City; State; Zip Code 6600 North Military Trail Boca Raton, FL 33496	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 07/03/2023	5 Payee name Paragon Solutions
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation 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 08/02/2023	Payee name Paragon Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Paragon Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 09/05/2023	5 Payee name Paragon Solutions	
6 Amount (\$) \$119.75	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name Paragon Solutions	
Amount (\$) \$29.13	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Paragon Solutions	
Amount (\$) \$17.05	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation 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: 32/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
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4 Date 10/03/2023	5 Payee name Pflugerville Education Foundation
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1401 W Pecan St Pflugerville, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Reid, Mason
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584
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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 Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Reid, Mason
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584
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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 Payroll
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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: 33/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/01/2023	5 Payee name Reid, Mason	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584	
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 Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Reid, Mason	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584	
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 Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Reid, Mason	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584	
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 Payroll
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: 34/39 Rpt:	2	FILER NAME Talarico, James (The Honorable)	3	Filer ID (Ethics Commission Filers) 00081913	
4	Date 09/01/2023	5	Payee name Reid, Mason			
6	Amount (\$) \$1,500.00	7	Payee address; City; State; Zip Code 2201 Willow Creek Dr Apt 272 Austin, TX 78741-4584			
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 Payroll			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/02/2023		Payee name Sine Die Smokers			
	Amount (\$) \$250.00		Payee address; City; State; Zip Code 4908 South Crest Dr. Austin, TX 78746			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 08/11/2023		Payee name Target			
	Amount (\$) \$49.78		Payee address; City; State; Zip Code 7000 Target Pkwy Brooklyn Park, MN 55445			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies			
		Complete <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: 35/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 09/26/2023	5 Payee name Texas House of Representatives Accounting Department	
6 Amount (\$) \$370.89	7 Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768	
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 Capitol office expenses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2023	Payee name Travis County Democratic Party	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 1311 E 6th St #B Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coordinated Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2023	Payee name Travis County Democratic Party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1311 E 6th St #B Austin, TX 78702	
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 Filing 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: 36/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/05/2023	5 Payee name USPS	
6 Amount (\$) \$15.03	7 Payee address; City; State; Zip Code P.O. Box 15207 Austin, TX 78761	
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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2023	Payee name USPS	
Amount (\$) \$354.00	Payee address; City; State; Zip Code P.O. Box 15207 Austin, TX 78761	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Wix.com	
Amount (\$) \$50.87	Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
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: 37/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 10/25/2023	5 Payee name Worley Printing Company	
6 Amount (\$) \$1,331.48	7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78722	
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 Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Zoom	
Amount (\$) \$17.05	Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113	
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 Communications Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name Zoom	
Amount (\$) \$17.05	Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113	
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 Communications Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 38/39 Rpt:	2	FILER NAME Talarico, James (The Honorable)	3	Filer ID (Ethics Commission Filers) 00081913
4	Date 09/05/2023	5	Payee name Zoom		
6	Amount (\$) \$17.05	7	Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113		
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 Communications Software		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/03/2023		Payee name Zoom		
	Amount (\$) \$17.05		Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113		
	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 Communications Software		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/03/2023		Payee name Zoom		
	Amount (\$) \$17.05		Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113		
	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 Communications Software		
		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 | 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: 39/39 Rpt:	2 FILER NAME Talarico, James (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081913
4 Date 12/04/2023	5 Payee name Zoom	
6 Amount (\$) \$17.05	7 Payee address; City; State; Zip Code 55 Almaden Boulevard 6th floor San Jose, CA 95113	
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 Communications Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held