CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00087764		 Total pages file 75 	
3 CANDIDATE /	MS / MRS / MR	FIRST	00007704	MI		
OFFICEHOLDER				1711		SEONLY
NAME	Mrs.	Cassandra			Date Received	
					ELECTRONICA	LLY FILED
					01/16/2024	
	NICKNAME	LAST		SUFFIX	01/10/2024	
		Hernandez				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE # CI	ΓY·	ZIP CODE	Date Hand-delivered or [Date Postmarked
OFFICEHOLDER	PO Box 1289	.,	,	2 0002		
MAILING	PO B0X 1289				Receipt #	Amount
ADDRESS						Amount
Change of Address	Addison, TX 75001					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Ms.	Kay				
NAME						
	NICKNAME	LAST		SUFFIX		
		Van Wey				
6 CAMPAIGN	STREET ADDRESS (NO F		ΔΡ	T / SUITE #; CITY;	STAT	E; ZIP CODE
TREASURER		O BOXT LEASE),		1730HE#, CH1,	SIA	L, ZII CODL
ADDRESS	14310 Valley Hi Circle					
(Residence or Business)						
	Farmers Branch, TX 75	234				
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER	(214) 329-1350					
PHONE						
8 REPORT TYPE	1 January 15			D	1 4 546 days after a series	
	X January 15	30th day befor	e election	Runoff	15th day after cam appointment (office	
	July 15	8th day before	election	Exceeded modified	Final Report (Attac	
				reporting limit		
	Marsh D. M			Marth		
9 PERIOD COVERED	Month Day Yea			Month Day	Year	
COVERED	07/01/2023	I	HROUGH	12/31/2023	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	r XF	Primary	Runoff	Other	
	03/05/2024					
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
				State Representa	ative District 115	
		GO.	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	www.e	thics.state.tx.u	S	Versio	on V3.5.1.0bfcfb67

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 75

orms provided by T	exas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.0bfcfb	
Signature of of	ficer administering	Printed name of officer administering	Title of officer	r administering oath	
01	, 20, to c	ertify which, witness my hand and seal of office.			
		aid	, this the	day	
AFFIX NO	DTARY STAMP / SEAL AB	OVE			
			assandra Hernandez of Candidate or Officehol	der	
			oppondre Llere er d		
		true and correct and includes under Title 15, Election Code.			
		l swear, or affirm, under penal	ty of perjury, that the acc	companying report is	
17 AFFIDAVIT					
LOAN TOTALS	OF THE REPOR			\$ 0.0	
BALANCE OUTSTANDING	6. TOTAL PRINCIP	RIOD PAL AMOUNT OF ALL OUTSTANDING LOANS AS	S OF THE LAST DAY		
CONTRIBUTION		AL CONTRIBUTIONS MAINTAINED AS OF THE	LAST DAY OF THE	\$ 88,606.3	
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 95,874.3	
EXPENDITURE TOTALS					
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 66,455.3	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.0	
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
		COMMITTEE CAMPAIGN TREASURER NAME			
	SPECIFIC				
		COMMITTEE ADDRESS			
Additional Pages					
COMMITTEE(S)	COMMITTEE TYPE				
15 NOTICE FROM POLITICAL	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	holder's knowledge or	
			00087764		
13 C / OH NAME	Hernandez, Cassand	lra (Mrs.)	14 Filer ID (Ethics Commission Filers	

S	UBT		FORM C/OH SHEET PG 3 3 of 75		
	ER NAM	ΛΕ z, Cassandra (Mrs.)	19 Filer ID 00087764	(Ethics C	ommission Filers)
		E SUBTOTALS SCHEDULE		SUE	TOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	60,771.24
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5,684.13
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	80,511.44
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	15,362.91
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 1/37 Rpt: 4/75	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/30/2023	Adams, Will					\$500.00
		6 Contributor address; City; State; Zip Co					
		Katy, TX 77494					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Trial Lawyer			Self			
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	10/17/2023	Alamilla, Frank					\$250.00
		Contributor address; City; State; Zip Co			1		
	Deimeinel eest	Keller, TX 76248		Englisher (Cas Instructions	Ĺ		
		ipation / Job title (See Instructions)		Employer (See Instructions Healthconnection Integr		d Modicine	
	Chiropractor				aic		
	Date		state PAC (ID#:)		Amount of Contribution (\$)	± · · · · · · · · · · · · · · · · · · ·
	07/25/2023	Allen Ramprasad, Mary					\$100.00
		Contributor address; City; State; Zip Co	ode				
		Round Rock, TX 78665					
\vdash	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Attorney			The Cole Law Firm	,		
⊨	Date	Full name of contributor Out-of-s	state PAC (ID#:			Amount of Contribution (\$)	
	08/21/2023	Anderson, Amelia	state PAC (ID#)			\$100.00
	00/21/2020	Contributor address; City; State; Zip Co	nde				\$100.00
			Jue				
		Coppell, TX 75019					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
⊨	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	11/07/2023	BOATRIGHT, DALIA					\$25.00
		Contributor address; City; State; Zip Co	ode				
		-					
		CARROLLTON, TX 75006					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	∋d		Not Employed			

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/37 Rpt: 5/75	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)			00087764	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	11/07/2023	BOATRIGHT, DALIA				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Dringinal occu	CARROLLTON, TX 75006	Employer (See Instructions			
ð	Not Employe	ipation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	3)		
╞				—	Amount of Contribution (¢)	
	Date 11/24/2023	Full name of contributor Out-of-state PAC (ID#: Balla, Becky	:)		Amount of Contribution (\$)	\$21.00
	11/24/2023	-		-		ΦΖΤ.00
		Contributor address; City; State; Zip Code				
		Carrollton, TX 75006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>г</u> 5)		
	Not Employe	€d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	07/25/2023	Barker, Terry				\$500.00
		Contributor address; City; State; Zip Code		1		
		Coppell, TX 75019				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>د</u> ا ا		
	Not Employe		Not Employed	>)		
╞	Date		:)	Τ	Amount of Contribution (\$)	
	07/25/2023	Bell, Matthew	/		Allount of Continuation (+)	\$100.00
		Contributor address; City; State; Zip Code		1		• -
		Dallas, TX 75204	-			
	•	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Consultant		Bain & Company	_		
	Date	Full name of contributor out-of-state PAC (ID#:	:)]	Amount of Contribution (\$)	
	08/04/2023	Benton, Danae				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77055				
\vdash	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Lawyer		The Cochran Firm	.,		
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SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	form.		Total pages Schedule A1: Sch: 3/37 Rpt: 6/75	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cassandra (Mrs.)			00087764	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/17/2023	Betzen, Mary Jo				\$100.00
	6 Contributor address; City; State; Zip Code		"		
	Plano, TX 75075	i			
-	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Lawyer		The Lidji Firm			
Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
12/04/2023	Bhattacharjee, Saibal				\$25.00
	Contributor address; City; State; Zip Code		"		
	Coppell, TX 75019	I			
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Consultant		Guidewire Software			
Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
07/26/2023	Bobier, Kila				\$250.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75201		Ĺ		
	upation / Job title (See Instructions)	Employer (See Instructions		real for Fred Love Inc	
Attorney		MDZ Legal Group Staff		-	
Date	Full name of contributor out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	
07/20/2023	Bohuslav, Monica				\$100.00
	Contributor address; City; State; Zip Code]		
D is singly and	Dallas, TX 75243		Ĺ		
	upation / Job title (See Instructions)	Employer (See Instructions	,	^	
Attorney		Carew Garcia Bohuslav	_		
Date	Full name of contributor out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	
09/12/2023	Boston, Grant				\$250.00
	Contributor address; City; State; Zip Code				
Duits since Lease	Dallas, TX 75208				
-	upation / Job title (See Instructions)	Employer (See Instructions	S)		
Attorney		Hamilton Wingo LLP			

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	The Instru	ction Guide explains how to complete this f	örm.	1	Total pages Schedule A1: Sch: 4/37 Rpt: 7/75	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/25/2023	Bradshaw, Stefanie				\$250.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75219	1			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Attorney		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	12/31/2023	Bradshaw, Stefanie				\$100.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75219	1			
		pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney/Jury	y Consultant	Payne Mitchell Ramsey	′		
	Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
	07/25/2023	Bravo, Monica				\$250.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75218	<u> </u>	ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Lira Bravo Law PLLC			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/17/2023	Brill, Frank				\$50.00
		Contributor address; City; State; Zip Code				
		Coppell, TX 75019				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	د) ا		
	Engineering		Cadence Design Syster			
					i (O stribution (d)	
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	Φ100 00
	09/26/2023	Brooks, Tsuki				\$100.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>دا</u>		
	Not employe		Not employed	5)		
_			Not employee			
4						

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	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 5/37 Rpt: 8/75	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Hernandez,	Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	12/26/2023	Brown, Jermaca	·			\$25.00
	I	6 Contributor address; City; State; Zip Code		·		
		Garland, TX 75040				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Self		Field Director			
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Τ	Amount of Contribution (\$)	
	08/30/2023	Camp, Kevin				\$500.00
	I	Contributor address; City; State; Zip Code		·		
		Houston, TX 77055				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Roven Camp			
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Τ	Amount of Contribution (\$)	
	08/04/2023	Campos Consulting Group LLC				\$150.00
	I	Contributor address; City; State; Zip Code		"		
		Austin, TX 78701	i			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Ţ	Amount of Contribution (\$)	
	07/27/2023	Care Plus Pain & Injury				\$2,500.00
		Contributor address; City; State; Zip Code]		
		Corlord TV 7E0//				
<u> </u>	Dringingl oog	Garland, TX 75044 Ipation / Job title (See Instructions)	Employer (Soo Instruction)	<u> </u>		
	Principal occu	pation / Job lille (See instructions)	Employer (See Instructions	S)		
				<u> </u>		
	Date	Full name of contributor out-of-state PAC	; (ID#:)		Amount of Contribution (\$)	<u>*100.00</u>
	07/23/2023	Chapa, Gisbel				\$100.00
		Contributor address; City; State; Zip Code				
		Rio Grande, TX 78582				
	Dringinal occu		Employer (See Instructions			
	Realtor	ipation / Job title (See Instructions)	Gisbel Chapa	5)		
	Nealioi		Gibber Onapa			
4						

	The Instru	ction Guide explains how to complete	this fo	orm.	1	Total pages Schedule A1: Sch: 6/37 Rpt: 9/75	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	10/08/2023	Chavez, Richard	·				\$250.00
	I	6 Contributor address; City; State; Zip Code					
		- · ·					
		Dallas, TX 75248					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Owner			Cmrg			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	12/04/2023	Chavez, Richard					\$100.00
	1	Contributor address; City; State; Zip Code					
		Dallas, TX 75248	r				
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Cmrg			Owner			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	08/17/2023	Chavez, Richard					\$500.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75248					
┝	Drincinal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u>		
	Franchisee			Cmrg	<i>י</i> ו		
╞					<u> </u>	Amount of Contribution (f)	
	Date 09/18/2023	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	\$500.00
	09/10/2023	Chavez, Richard					ΦΟΟΟ.ΟΟ
		Contributor address; City; State; Zip Code					
		Dallas, TX 75248					
\vdash	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	L;)		
	Owner	•		Cmrg			
╞	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	07/26/2023	Clement, Todd				•••	\$500.00
	I	Contributor address; City; State; Zip Code					
		Plano, TX 75093					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Clement speer			
1							

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/37 Rpt: 10/75	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/24/2023	Cox, Sean				\$250.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ		Dallas, TX 75313				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	attorney		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ţ	Amount of Contribution (\$)	
	11/28/2023	DFW Open MRI				\$1,000.00
		Contributor address; City; State; Zip Code]		
	Drizeinel eeu	Dallas, TX 75247	Employer (Cool Instructions	<u> </u>		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	to 500.00
	07/27/2023					\$2,500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75374				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	1 1110.000			-,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/25/2023	Decker, Debra	/			\$100.00
	0112012020	Contributor address; City; State; Zip Code		ł		Ψ100.00
		Continuation address, City, State, Lip Code				
		Dallas, TX 75205				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	consultant		self			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/16/2023	Donovan, Dan & Hon. Carol				\$500.00
	I	Contributor address; City; State; Zip Code		•		
		Dallas, TX 75214				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney-Me	diator	Carol Crabtree Donovar	n P	С	

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 8/37 Rpt: 11/75	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/20/2023	Donovan, Dan & Hon. Carol				\$500.00
		6 Contributor address; City; State; Zip Code		"		
		Dallas, TX 75214				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions			
	Attorney-Me	diator	Carol Crabtree Donovar	n P(C	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Donovan, Dan & Hon. Carol				\$500.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75214	 			
		ipation / Job title (See Instructions)	Employer (See Instructions		-	
	Attorney-Me	diator	Carol Crabtree Donovar	n Po	C	
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	08/28/2023	Dunlap, Andrew				\$250.00
		Contributor address; City; State; Zip Code]		
	Duin single easy	Houston, TX 77024		Ĺ		
	Attorney	ipation / Job title (See Instructions)	Employer (See Instructions Josephson Dunlap	S)		
				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±1 000 00
	09/08/2023	Durham, Pittard & Spalding, LLP				\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75222				
┝	Dringing occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	Ρπιτιμαι στιτα			S)		
╘				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>ቀ100 00</u>
	10/12/2023	Ellis, Al				\$100.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75219				
┝	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ر)</u>		
	Lawyer		Sommermanmccaffity	5)		
┝	Luvy 5.					

	The Instru	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A1: Sch: 9/37 Rpt: 12/75	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
	Date 07/27/2023	5 Full name of contributor out-of-state P/ Ellis, Alfred	'AC (ID#:)	7	Amount of Contribution (\$)	\$250.00
		6 Contributor address; City; State; Zip Code			•		
		Dalas, TX 75219					
8	Principal occu	I pation / Job title (See Instructions)	ę	9 Employer (See Instructions	<u> </u>		
	Attorney			Sommerman, McCaffity		uesada & Geisler, LLP	
	Date	Full name of contributor out-of-state PA	AC (ID#:)	Γ	Amount of Contribution (\$)	
	09/07/2023	Enlow, Al C					\$200.00
		Coppell, TX 75019					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Not Employe			Not Employed	-,		
	Date	Full name of contributor Out-of-state PA	AC (ID#:)	Ι	Amount of Contribution (\$)	
	Date 11/22/2023	Full name of contributor out-of-state P/ Fernandez, Reynaldo Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$100.00
		Fernandez, Reynaldo Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	11/22/2023	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219)		Amount of Contribution (\$)	\$100.00
	11/22/2023	Fernandez, Reynaldo Contributor address; City; State; Zip Code	PAC (ID#:	Employer (See Instructions	s)	Amount of Contribution (\$)	\$100.00
	11/22/2023 Principal occu	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219			s)	Amount of Contribution (\$)	\$100.00
	11/22/2023 Principal occu Attorney	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions)		JLG	s)		\$100.00
	11/22/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P/		JLG	s)		
	11/22/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P/ Flanary, Donald		JLG	s)		
	11/22/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P/ Flanary, Donald Contributor address; City; State; Zip Code		JLG	5)		
	11/22/2023 Principal occu Attorney Date 09/18/2023	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P, Flanary, Donald Contributor address; City; State; Zip Code McKinney, TX 75070		JLG)			
	11/22/2023 Principal occu Attorney Date 09/18/2023	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P/ Flanary, Donald Contributor address; City; State; Zip Code		JLG	5)	Amount of Contribution (\$)	
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P, Flanary, Donald Contributor address; City; State; Zip Code McKinney, TX 75070	PAC (ID#:	JLG)	5)	Amount of Contribution (\$)	
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu Attorney	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor out-of-state P/ Flanary, Donald Contributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions)	PAC (ID#:	JLG)	5)	Amount of Contribution (\$)	
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code Contributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Out-of-state P/ Flanary, Donald Contributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Out-of-state P/ Full name of contributor	PAC (ID#:	JLG)	5)	Amount of Contribution (\$)	\$100.00
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code McKinney, Donald Contributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Gout-of-state P/ Forbes, Michael	PAC (ID#:	JLG)	5)	Amount of Contribution (\$)	\$100.00
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu Attorney Date	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code McKinney, Donald Contributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Gout-of-state P/ Forbes, Michael	PAC (ID#:	JLG)	5)	Amount of Contribution (\$)	\$100.00
	11/22/2023 Principal occu Attorney Date 09/18/2023 Principal occu Attorney Date 08/30/2023	Fernandez, Reynaldo Contributor address; City; State; Zip Code Dallas, TX 75219 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code McKinney, TX 75070 pation / Job title (See Instructions) Full name of contributor Gontributor address; City; State; Zip Code Contributor address; City; State; Zip Code	PAC (ID#:	JLG)	s)	Amount of Contribution (\$)	\$100.00

	The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 10/37 Rpt: 13/75	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Hernandez,	Cassandra (Mrs.)		00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
	11/27/2023	Forehand, Amie		\$250	.00
		6 Contributor address; City; State; Zip Code			
		Carrollton, TX 75006			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Sourcing Ma	Inager	Charles Schwab		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/20/2023 Galliani, Carlos			\$100	.00
		Contributor address; City; State; Zip Code			
	Dringing occ	Dallas, TX 75230	Employer (See Instructions		
	Attorney	upation / Job title (See Instructions)	Employer (See Instructions The Galliani Firm	5)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/12/2023			\$100	.00
		Contributor address; City; State; Zip Code			
		Coppell, TX 75019			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Not Employe		Not Employed	,	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	07/19/2023	Garcia MD, Catalina E		\$250	.00
	-	Contributor address; City; State; Zip Code			
		Dallas, TX 75231			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions		
	Not Employe	ed	Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	09/26/2023	Garcia MD, Catalina E		\$100	.00
		Contributor address; City; State; Zip Code			
		Dallas, TX 75231			
		upation / Job title (See Instructions)	Employer (See Instructions	3)	
	Not Employe	3d	Not Employed		

	The Instru				1	Total pages Schedule A1:	
		ction Guide explains how to con		orm.		Sch: 11/37 Rpt: 14/75	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
4	Date		of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/11/2023	Ginn, John					\$2,500.00
		6 Contributor address; City; State; Zip C					
		Wylie, TX 75098					
8	Principal occu	pation / Job title (See Instructions)	T	9 Employer (See Instructions	;)		
	Attorney			McCraw Law Group	,		
-	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/26/2023	Ginsberg, Jac	· · · ·				\$25.00
		Contributor address; City; State; Zip C					
		Dallas, TX 75230	r				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Self			
	Date		of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/09/2023	Glassco, Tim					\$250.00
		Contributor address; City; State; Zip C	Code				
		Austin, TX 78704					
	Principal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	 ;)		
	Partner			Cross Oak Group	')		
╞	Date	Full name of contributor Out-of	of-state PAC (ID#:			Amount of Contribution (\$)	
	10/26/2023	Godfrey, Justin		/		, where existing a second s	\$100.00
		Contributor address; City; State; Zip C	Code				
		Austin, TX 78721					
		ipation / Job title (See Instructions)		Employer (See Instructions			
L	Vice Preside	ent/Treasurer		Barilla Management Inc			
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	Gomez, Jorge					\$20.00
		Contributor address; City; State; Zip C	Code				
		El Paso, TX 79934					
	Princinal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	<u> </u> ו)		
	English Profe			El Paso Community Col		e	
			<u> </u>	,			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 12/37 Rpt: 15/75
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Hernandez,	Cassandra (Mrs.)		00087764
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
	11/22/2023	Gomez, Jorge		\$20.24
		6 Contributor address; City; State; Zip Code		
		El Paso, TX 79934		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)
	Professor		El Paso Community Col	lege
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/20/2023	Gomez, Julian		\$1,000.00
		Contributor address; City; State; Zip Code		
		mcallen, TX 78504		
	•	pation / Job title (See Instructions)	Employer (See Instructions	•
	Attorney		The Gomez Law Firm P	LLC
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/01/2023	Gonzales, Sergio		\$50.00
		Contributor address; City; State; Zip Code		1
		Plano, TX 75074		Į
		ipation / Job title (See Instructions)	Employer (See Instructions Lumel technologies	;)
L		ccount manager		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/24/2023	Gonzalez, Reina		\$250.00
		Contributor address; City; State; Zip Code		
		Dallas, TX 75238		
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	attorney		self	»)
⊢	-			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/21/2023	Gould, Kari		\$15.00
		Contributor address; City; State; Zip Code		
		Carrollton, TX 75006		
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Teacher		Dallas County Juvenile I	
┝			,	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/37 Rpt: 16/75	
2 FILER NAME			3 Filer ID (Ethics Commission	ı Filers)
	Cassandra (Mrs.)		00087764	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
11/21/2023	Gould, Kari			\$15.00
	6 Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	·)	
Teacher		Dallas County Juvenile [Department	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/21/2023	Gould, Kari		• •	\$15.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	·)	
Teacher		Dallas County Juvenile [Department	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/21/2023	Gould, Kari			\$15.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)	
Teacher		Dallas County Juvenile [Department	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/21/2023	Gould, Kari			\$15.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
	ipation / Job title (See Instructions)	Employer (See Instructions)		
Teacher		Dallas County Juvenile I	Department	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/22/2023	Greco, Shelly			\$100.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Attorney		Self		

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	The Instru	ction Guide explains how t	to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/37 Rpt: 17/75	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/28/2023	Greco, Shelly	-				\$100.00
	I	6 Contributor address; City; State	te; Zip Code				
			-				
		Plano, TX 75075					
8		upation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Attorney			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/22/2023	Greco, Shelly					\$100.00
	I	Contributor address; City; State					
		Plano, TX 75075		· · · · · · ·			
		upation / Job title (See Instructions)		Employer (See Instructions	;)		
	Attorney			Self	—		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/01/2023	Green, Manuel					\$500.00
		Contributor address; City; State	ιe; Zip Code				
		Dallas, TX 75240					
┝	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Lawyer			Meg Health Care	'		
╞	Date	Full name of contributor	out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	10/26/2023	Gutierrez, Jorge		/			\$200.00
	10/20/2020	Contributor address; City; State	to: Zin Code				Ψ200.00
			.e, Zip Coue				
		Dallas, TX 75208					
⊢	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	attorney			attorney			
╞	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/30/2023	Heckaman, Aaron	-				\$500.00
	1	Contributor address; City; State	te; Zip Code				
		Houston, TX 77008					
		upation / Job title (See Instructions)		Employer (See Instructions			
	Attorney			Aaron M Heckaman PLI	_C		

1 Total pages Schedule A1: Sch: 15/37 Rpt: 18/75
3 Filer ID (Ethics Commission Filers)
00087764
7 Amount of Contribution (\$)
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/37 Rpt: 19/75	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
[Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/06/2023	Horlick, Benjamin				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Charlotte, NC 28205				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2023	Horowitz, Daniel				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/24/2023	Jimenez, Katelyn				\$10.00
		Contributor address; City; State; Zip Code				
		West Chicago, IL 60185				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	LMT		Viride			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/27/2023	Johnson, Julie				\$2,500.00
		Contributor address; City; State; Zip Code				
		Farmers Branch, TX 75234				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	State Rep		State of Texas			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/17/2023	KO Law Firm PLLC				\$100.00
		Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Dallas, TX 75243				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	The Instru	ction Guide explains how to	o complete this f	orm.	1	Total pages Schedule A1: Sch: 17/37 Rpt: 20/75	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		Cassandra (Mrs.)				00087764	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/17/2023	Kastl, Kristina N.					\$1,000.00
		6 Contributor address; City; State	e; Zip Code		1		
		Dallas, TX 75204					
8		upation / Job title (See Instructions)	ļ	9 Employer (See Instructions	;)		
L	Attorney			KASTL LAW P.C.	_		-
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Kastl, Kristina N.					\$1,000.00
		Contributor address; City; State					
	<u> </u>	Dallas, TX 75204			Ĺ		
	•	upation / Job title (See Instructions)	ļ	Employer (See Instructions KASTL LAW P.C.	5)		
L	Attorney				—		
	Date	_	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2023	Kearney RN JD, Kathleen					\$100.00
		Contributor address; City; State	؛; Zip Code				
		Dallas, TX 75219					
	Principal occu	upation / Job title (See Instructions)	,	Employer (See Instructions	<u>ل</u> ۱		
	Attorney	pullon, oos lille (eee	ļ	Kearney Law Firm	''		
	Date	Full name of contributor	out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	09/18/2023	King, Sheena		/			\$20.00
	03/10/2020		o: Zin Codo		•		Ψ20.00
		Contributor address; City; State	; Zip Code				
		McKinney, TX 75071					
⊢	Principal occu	upation / Job title (See Instructions)	,	Employer (See Instructions	上 3)		
	Agency Lead		ļ	Collin County Democrat		^o arty	
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/25/2023	Kisselburgh, Robert				,	\$250.00
		Contributor address; City; State	e [.] Zin Code		ł		·
			, zip 0000				
		Aledo, TX 76008					
┢	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Attorney		ļ	Kisselburgh Law Firm			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/37 Rpt: 21/75	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
-		Cassandra (Mrs.)		ľ	00087764	TT lieroy
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/18/2023	Kleyman, Michael				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Arlington, TX 76017				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Practice Adr	ninistrator	Brewer Chiropractic			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/16/2023	Kostura, Judy				\$100.00
				1		
		Austin, TX 78746				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Sorrels Law	-,		
⊨				_	Amount of Contribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢500.00
	08/30/2023	Kwon, Christopher				\$500.00
		Contributor address; City; State; Zip Code				
		Pearland, TX 77584				
_	Dringing ago		Employer (Cap Instructions			
	Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Kwon Law PLLC	5)		
	_					
	Date)		Amount of Contribution (\$)	
	08/11/2023	Larsen, Brittany				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77018				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	RN		Memorial Hermann			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/04/2023	Law Offices of A. Craig Eiland PC				\$250.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	-	· · ·		-		
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	The Instruc	ction Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/37 Rpt: 22/75	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		Cassandra (Mrs.)				00087764	,
4	Date	5 Full name of contributor	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/25/2023	Lidji, Isaac					\$250.00
		6 Contributor address; City; State; Z	ip Code				
		dallas, TX 75231					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Attorney			The Lidji Firm			
	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Lidji, isaac					\$1,000.00
		Contributor address; City; State; Z					
		Dallas, TX 75231					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions			
	attorney			The Lidji Firm			
	Date	Full name of contributor	ut-of-state PAC (ID#:)	<u> </u>	Amount of Contribution (\$)	
	10/17/2023	Logie, Katelyn					\$100.00
	10/11/2020	Contributor address; City; State; Z					\$100.00
		Contributor address, City, State, 2	ip Code				
		Houston, TX 77056					
-	Principal occu	L pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Lawyer			Self	,		
	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Logie, Katelyn					\$50.00
	00/10/2020		in Codo				\$00.00
		Contributor address; City; State; Z	ip Code				
		Houston, TX 77056					
<u> </u>	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ວ		
	Lawyer			Self	,		
					-		
	Date		ut-of-state PAC (ID#:)		Amount of Contribution (\$)	¢100.00
	07/11/2023	Long, David					\$100.00
		Contributor address; City; State; Z	lip Code				
		Dallas, TX 75248					
L	Drincipal acc::			Employer (See Instructions	<u>ا</u>		
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions Irving Injury Center	9		

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/37 Rpt: 23/75	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Cassandra (Mrs.)			00087764	,
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	07/11/2023	Long, David				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75248				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Partner		Irving Injury Center			
	Date	Full name of contributor out-of-state PAC (ID#	· :)	Γ	Amount of Contribution (\$)	
	12/28/2023	Long, David				\$100.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75248				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chiropractic	clinic owner	Self			
F	Date	Full name of contributor out-of-state PAC (ID#:	L)	Γ	Amount of Contribution (\$)	
	07/27/2023	Lopez, Roy & Bridget				\$500.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75229				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney		Linebarger Goggan Blai	ir		
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	07/27/2023	Luckhardt, Louis				\$50.00
		Contributor address; City; State; Zip Code		1		
		Ennis, TX 75119				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Union Office	r	AFL-CIO Dallas			
	Date	Full name of contributor out-of-state PAC (ID#)	Ī	Amount of Contribution (\$)	
	12/27/2023	Lum, Melissa				\$200.00
		Contributor address; City; State; Zip Code		1		
		Coppell, TX 75019				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Due Diligeno	e Analyst	Melissa M. Lum			

	The Instruc	ction Guide explains how to c	complete this for	m.	1	Total pages Schedule A1: Sch: 21/37 Rpt: 24/75	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Hernandez, (Cassandra (Mrs.)				00087764	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/01/2023	M Perdue, Jim					\$1,000.00
		6 Contributor address; City; State; Zi	Lin Code				
		· · · · · · · · · · · · · · · · · · ·					
		Houston, TX 77056					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Attorney			Perdue & Kidd			
	Date	Full name of contributor 🛛 ou	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2023	M Wagner, Angela					\$5.00
		Contributor address; City; State; Zi	Zip Code				
		Dallas, TX 75248					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Self employe	:d		Emory Notary Services		<u> </u>	
	Date	Full name of contributor 🛛 🗌 οι	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/18/2023	MD Law Professional LLC					\$1,000.00
		Contributor address; City; State; Zi	Lip Code		1		
	Drive in all a serv	Dallas, TX 75251			Ĺ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>مح ممم مم</u>
	07/27/2023	MRI Centers of Texas					\$5,000.00
		Contributor address; City; State; Zi	.ip Code				
		Dallas, TX 75211					
┝	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> וו		
	T mopulous				"		
╞	Date	Full name of contributor	 out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	09/18/2023	Maggio, Marissa		/			\$250.00
	• • • • • •	Contributor address; City; State; Zi	in Code				T
			ip code				
		Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Law firm Aaron Herbert			
			I				

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/37 Rpt: 25/75	
2	FILER NAME			3	Filer ID (Ethics Commission) Filers)
[Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/07/2023	Mahesh, Al				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Farmers Branch, TX 75234				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Engineer		Verizon.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/07/2023	Mahesh, Al				\$25.00
		Contributor address; City; State; Zip Code		1		
		Farmers Branch, TX 75234				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Engineer	,	Verizon.	-,		
⊨	_			<u> </u>	Amount of Contribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	08/27/2023	Mahesh, Al				ΦT0.00
		Contributor address; City; State; Zip Code				
		Farmers Branch, TX 75234				
⊢	Dringing age		Employer (Cap Instructions	$\frac{1}{1}$		
	Manager	pation / Job title (See Instructions)	Employer (See Instructions Verizon	>)		
╞	_			_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*** * * *
	08/28/2023	Mahesh, Al				\$10.00
		Contributor address; City; State; Zip Code				
		Farmers Branch, TX 75234				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager		Verizon			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Martin Hoffman Campaign				\$100.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75229				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊢						
1						

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 23/37 Rpt: 26/75	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
Hernandez,	Cassandra (Mrs.)		00087764	-
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)	
12/15/2023	· ·			\$50.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75208		-	
	upation / Job title (See Instructions)	9 Employer (See Instructions)	.)	
Consultant		CG Infinity		
Date		t:)	Amount of Contribution (\$)	
12/31/2023				\$50.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75208			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
Consultant		CG Infinity)	
Date	Full name of contributor Out-of-state PAC (ID#	-	Amount of Contribution (\$)	
10/14/2023	Full name of contributor out-of-state PAC (ID# Mata, Eric	:)	ΑΠΙΟΠΤΙ ΟΙ ΟΟΠΠΙΒΟΠΟΙΤ (Φ)	\$10.00
10/17/2020				Ψ10.00
	Continuation address, City, State, Zip Code			
	Dallas, TX 75204			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Not employe	ed set of the set of t	Not employed		
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
11/14/2023	Mata, Eric			\$10.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not employe		Not employed		
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)	÷=0.00
07/14/2023	Mata, Eric			\$50.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	() ()	
Not employe		Not employed	7	
	<u> </u>			

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<i>4</i> 100.00

	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 25/37 Rpt: 28/75	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Hernandez,	Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/30/2023	Mitchell, James				\$500.00
		6 Contributor address; City; State; Zip Code		•		
		Dallas, TX 75225-2707				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Lawyer		Self			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/03/2023	Montes, Rachel				\$500.00
		Contributor address; City; State; Zip Code		ł		
		Irving, TX 75063				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Lawyer		Self			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/28/2023	Neil, JoDee				\$100.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75229				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Simon Greenstone			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/04/2023	Oney, Thomas				\$250.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78756				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		_
	External Affa	.irs	LCRA			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/19/2023	Pak, Dong				\$5.00
		Contributor address; City; State; Zip Code		1		
		Garland, TX 75044				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		_
	Engineer		FireMon Corp.			

	The Instru	ction Guide explains how to complete this	s form).	1	Total pages Schedule A1: Sch: 26/37 Rpt: 29/75	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	
4	Date	5 Full name of contributor Out-of-state PAC (ID	D#:)	7	Amount of Contribution (\$)	
	09/18/2023	Palmer, George					\$100.00
		6 Contributor address; City; State; Zip Code					
		DALLAS, TX 75230-3211					
8		ipation / Job title (See Instructions)		Employer (See Instructions)		
	tech writer		F	Fujitsu			
	Date	Full name of contributor out-of-state PAC (ID	D#:)		Amount of Contribution (\$)	
	07/27/2023	Parra, Bryan					\$100.00
		Contributor address; City; State; Zip Code	,				
	B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Grand Prairie, TX 75052					
		ipation / Job title (See Instructions)		Employer (See Instructions Dallas ISD)		
L	Assistant Pri	· ·		Dalias ISD			
	Date	Full name of contributor out-of-state PAC (ID)	D#:)		Amount of Contribution (\$)	* 25 00
	07/26/2023	Patel, Dharini					\$25.00
		Contributor address; City; State; Zip Code					
		Richardson, TX 75082					
┢	Principal occu	pation / Job title (See Instructions)	E	Employer (See Instructions)		
	Project Coor	dinator	(Cisco			
F	Date	Full name of contributor out-of-state PAC (ID:	D#:)		Amount of Contribution (\$)	
	09/10/2023	Payne, Andrew					\$1,000.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75219					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Lawyer		`	Self			
	Date	Full name of contributor out-of-state PAC (ID	D#:)		Amount of Contribution (\$)	
	10/27/2023	Payne, James					\$500.00
		Contributor address; City; State; Zip Code					
		Beaumont, TX 77701					
-	Principal occu	pation / Job title (See Instructions)	F	Employer (See Instructions	<u> </u>		
	Attorney			Provost Umphrey)		
⊢	7		<u> </u>				

	The Instru	ction Guide explains how to complete t	his form.		1 Total pages Schedule A1: Sch: 27/37 Rpt: 30/75	
2	FILER NAME				3 Filer ID (Ethics Commiss	sion Filers)
-		Cassandra (Mrs.)			00087764	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)	
	07/28/2023	Peralta, Edgar				\$1,000.00
		6 Contributor address; City; State; Zip Code				
_		Dallas, TX 75224		(O)	、 、	
8	Principal occu Chiropractor	pation / Job title (See Instructions)		yer (See Instructions a Chiropractic	3)	
				-		
	Date		C (ID#:)	Amount of Contribution (\$)	
	08/16/2023	Perez, Jose				\$5.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75234				
	Principal occu	pation / Job title (See Instructions)	Emplov	yer (See Instructions	<u> </u>	
	•	nal development specialist		State teachers as		
_	Date	Full name of contributor out-of-state PAC	<u>ا</u> ۲ (۱۵#۰)	Amount of Contribution (\$)	
	10/25/2023	Pettit, Ann	(IDπ			\$5.00
		Carrollton, TX 75006				
	•	pation / Job title (See Instructions)		yer (See Instructions	;)	
	Not Employe	:d	Not Er	mployed		
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
	11/25/2023	Pettit, Ann				\$5.00
		Contributor address; City; State; Zip Code				
		Correlitor TV 75006				
	Dringing occu	Carrollton, TX 75006	Employ	yer (See Instructions	A	
	Not Employe	,		mployed)	
				, inployed		
	Date 08/25/2023	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	\$5.00
	0012012020	· · · · · · · · · · · · · · · · · · ·				ψ0.00
		Contributor address; City; State; Zip Code				
		Carrollton, TX 75006				
	Principal occu	I pation / Job title (See Instructions)	Employ	yer (See Instructions	l;)	
	Not Employe			mployed	, ,	

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 28/37 Rpt: 31/75	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	Cassandra (Mrs.)		00087764	510)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/25/2023	Pettit, Ann			\$5.00
	6 Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Not Employe	;d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/25/2023	Pettit, Ann			\$5.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
	ipation / Job title (See Instructions)	Employer (See Instructions)	·)	
Not Employe	:d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/26/2023	Rafi, Ayesha		\$5	500.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75023		<u></u>	
	ipation / Job title (See Instructions)	Employer (See Instructions) Rafi DeBose PLLC)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/27/2023	Ramos, Guillermo		\$2	250.00
	Contributor address; City; State; Zip Code			
	Farmers Branch, TX 75234			
Dringinal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Attorney	pation / Job title (See instructions)	Employer (See Instructions))	
		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	~~~ ~~
08/15/2023	Robinson, Joli		Φ2	200.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75339			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Nonprofit Ex		Housing Forward)	
		riousing roiward		

				_		
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 29/37 Rpt: 32/75	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Cassandra (Mrs.)			00087764	· ·
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/26/2023	Robles, Jose	I			\$100.00
		6 Contributor address; City; State; Zip Code		·		
		1	I			
		Fort Worth, TX 76108				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Lawyer		Robles Jr Law			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	09/08/2023	Rodriguez, Felicia	l			\$2,500.00
		Contributor address; City; State; Zip Code		·		
			I			
		1				
		Cedar Hill, TX 75104				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	is)		
	Business De	evelopment Director	Felicia Rodriguez			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Т	Amount of Contribution (\$)	
	07/21/2023	Rodriguez, Oscar Rey	,			\$100.00
	01722/2020			·		Ψ±00.0-
		Continuutor address, City, State, Zip Code	I			
		1	I			
		Dallas, TX 75370	I			
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Attorney		Law Office of Oscar Rey		odriguez	
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/13/2023	Ruback, Chad)			\$100.00
	09/13/2023	· · · · · · · · · · · · · · · · · · ·				Φ100.00
		Contributor address; City; State; Zip Code	I			
		1	I			
		Dallas, TX 75225				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	attorney		self	5)		
⊨		Full name of contributor Out-of-state PAC (ID#:		—	Amount of Contribution (P)	
	Date)		Amount of Contribution (\$)	¢1ΕΟ ΟΟ
	10/17/2023	Sally Montgomery Campaign for Judge				\$150.00
		Contributor address; City; State; Zip Code	I			
		1				
		Dallas, TX 75244				
┡	Duin singl oog			<u> </u>		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	S)		
L						

					
The Instru	uction Guide explains how to co	omplete this form.	1	Total pages Schedule A1: Sch: 30/37 Rpt: 33/75	
2 FILER NAMI	Ξ		3	Filer ID (Ethics Commissio	on Filers)
Hernandez	, Cassandra (Mrs.)			00087764	-
4 Date	5 Full name of contributor ou	t-of-state PAC (ID#:) 7	Amount of Contribution (\$)	
11/14/2023					\$100.00
	6 Contributor address; City; State; Zi	o Code			
	Austin TV 70744				
Principal occ	Austin, TX 78744 cupation / Job title (See Instructions)	9 Employer (See I			
Chief of Sta		TCRP	IISuucions		
Date				Amount of Contribution (\$)	
Date 10/16/2023		t-of-state PAC (ID#:)	ΑΙτιουπί οι σοπιτιρατιστι (φ)	\$500.00
10/10/2020		2 Code			φ000.00
	Contributor address; City; State; Zij	Code			
	Dallas, TX 75205				
Principal occ	cupation / Job title (See Instructions)	Employer (See I	Instructions)		
comptroller		schorr law firm	ı		
Date	Full name of contributor	t-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/02/2023	Sciano, Daniel				\$1,000.00
	Contributor address; City; State; Zi	Code			
	Con Antonio TV 70016				
Drippingloor	San Antonio, TX 78216	Employer (Soci			
Attorney	cupation / Job title (See Instructions)	Employer (See I Tinsman & Sci			
				Amount of Contribution (ft)	
Date 07/12/2023		t-of-state PAC (ID#:)	Amount of Contribution (\$)	\$500.00
0//12/2023	· · ·	• 1-			ΦΟΟΟΟ
	Contributor address; City; State; Zij) Code			
	dallas, TX 75208				
Principal occ	upation / Job title (See Instructions)	Employer (See I	Instructions)		
Attorney		The Sepulveda	a Law Group	p PLLCPLLC	
Date	Full name of contributor	t-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/17/2023	Sepulveda, Jessica				\$250.00
	Contributor address; City; State; Zi) Code			
	dallas, TX 75208				
	cupation / Job title (See Instructions)	Employer (See I			
Attorney		The Sepulveda	a Law Group		
1					

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 31/37 Rpt: 34/75	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Hernandez,	Cassandra (Mrs.)		00087764	
4 Date	5 Full name of contributor out-of-state PAC (ID#	ŧ:)	7 Amount of Contribution (\$)	
09/13/2023	Siegel, Mark		\$2	250.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75229			
	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Not Employe	2d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/26/2023	Siegel, Mark & Linda		\$2	250.00
	Contributor address; City; State; Zip Code			
	Dallac TV 75220			
Drincinal occu	Dallas, TX 75229 Ipation / Job title (See Instructions)	Employer (See Instructions	A	
Not Employe		Not Employed	·)	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	.00 00
11/02/2023	Simpson Tuegel, Michelle		φυ	500.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75218			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Lawyer		Self - The Simpson Tue		
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	
07/12/2023	Smith, Clayton			\$10.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
	pation / Job title (See Instructions)	Employer (See Instructions	·)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
10/12/2023	Smith, Clayton		\$	\$10.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006	_		
	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Not Employe	3d	Not Employed		

	The Instru	ction Guide explains how to complete	this fo	orm.	1	Total pages Schedule A1: Sch: 32/37 Rpt: 35/75	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	Hernandez,	Cassandra (Mrs.)				00087764	-
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:_)	7	Amount of Contribution (\$)	
	11/12/2023	Smith, Clayton					\$10.00
		6 Contributor address; City; State; Zip Code					
	- · · ·	Carrollton, TX 75006			Ĺ		
8		Ipation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Not Employe			Not Employed	-		
	Date	—	AC (ID#:)		Amount of Contribution (\$)	
	07/26/2023						\$50.00
		Contributor address; City; State; Zip Code					
		Carrollton, TX 75006					
_	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ۱)		
	Consultant			Fidelity Investments	''		
\vdash	Date	Full name of contributor out-of-state PA			I	Amount of Contribution (\$)	
	08/12/2023	Smith, Clayton	4C (IDπ	/			\$10.00
	00, 11, 11, 11, 11, 11, 11, 11, 11, 11,						T-
		Carrollton, TX 75006					
	•	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor out-of-state PA	 AC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Smith, Clayton					\$10.00
		Contributor address; City; State; Zip Code					
		Carrollton, TX 75006					
_	Drincinal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u>		
	Not Employe			Not Employed	<i>י</i> י		
╞			: 0 (10#)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	I	Amount of Contribution (\$)	
	Date 12/12/2023	Full name of contributor out-of-state PA Smith, Clayton	чс (ID#)			\$10.00
	1412020	Contributor address; City; State; Zip Code					Ψ10.00
		Carrollton, TX 75006					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	. ;)		
	Not Employe	èd		Not Employed			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 33/37 Rpt: 36/75
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Hernandez, Cassandra (Mrs.)	00087764
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/04/2023 Steven and Amy, Bresnen	\$250.00
6 Contributor address; City; State; Zip Code	
Austin, TX 78701	
8Principal occupation / Job title (See Instructions)9Employer (See Instruction)	
Consultant Texas Court Reporters	s Association
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/20/2023 Storch, Todd	\$10.00
Contributor address; City; State; Zip Code	
Coppell, TX 75019	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Managing Director Gratitude and Grace C	Consulting
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/06/2023 Stough, Aaron	\$25.00
Contributor address; City; State; Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Health Inspector City of Richardson	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/29/2023 Stough, Aaron	\$25.00
Contributor address; City; State; Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Sanitarian Village of Palatine	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/26/2023 Stough, Aaron	\$25.00
Contributor address; City; State; Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
	ns)

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 34/37 Rpt: 37/75			
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)		
		Cassandra (Mrs.)				00087764	-		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)			
	07/20/2023	Sykes, Becky	-				\$250.00		
		6 Contributor address; City; State	e; Zip Code		1				
		Dallas, TX 75205							
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)					
	Not employe	:d		Not employed					
	Date	Full name of contributor)	Γ	Amount of Contribution (\$)				
	08/30/2023	Taylor, Ben					\$100.00		
		Contributor address; City; State	1						
<u> </u>	Dringing ogg	Dallas, TX 75214	Employer (Cap Instruction						
	attorney	upation / Job title (See Instructions)	Employer (See Instructions Ted B. Lyon & Associate						
		□							
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢100.00		
	09/26/2023						\$100.00		
		Contributor address; City; State	e; Zip Code						
		Dallas, TX 75214							
	Principal occu	I upation / Job title (See Instructions)		Employer (See Instructions	∟ 3)				
	attorney			Ted B. Lyon & Associate	-				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)			
	09/03/2023	Texas Trial Lawyers Associa	ation				\$5,000.00		
		Contributor address; City; State			1				
		Austin, TX 78701							
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)				
╘					—				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	*1 000 00		
	10/10/2023	The Benton Law Firm	·····				\$1,000.00		
		Contributor address; City; State							
		Dallas, TX 75207							
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u>ا۔</u> 3)					
			_						

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 35/37 Rpt: 38/75	_	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Cassandra (Mrs.)		00087764	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
10/16/2023	Tippett, Rosalyn			\$100.00
	6 Contributor address; City; State; Zip Code			
	Flower Mound, TX 75022			
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
attorney		self/solo		
Date	Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$)		
07/05/2023	Townsend, Howard			\$50.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75007			
Drincinal occu	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions	<u></u>	
Not Employe	pation / Job title (See Instructions)	5)		
		Not Employed		
Date 09/28/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$50.00
0912012023	Townsend, Howard			Ф 00.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75007			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Not Employe	ed .	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/04/2023	Tucker, Tiara			\$25.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006	1		
	pation / Job title (See Instructions)	Employer (See Instructions		
PR		State Farm & Self-emplo	oyees	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/18/2023	Van Wie, Mic			\$100.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006			
Principal occu	pation / Job title (See Instructions)	<u></u>		
Sourcing		Employer (See Instructions Zak Products II LLP	»)	
Coursing				

	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 36/37 Rpt: 39/75				
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)		
	Hernandez,	Cassandra (Mrs.)			00087764			
4	Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7	Amount of Contribution (\$)			
	12/12/2023	Wallace, Sharonda				\$100.00		
		6 Contributor address; City; State; Zip Code		1				
		1						
		1						
		Coppell, TX 75019						
		upation / Job title (See Instructions)	9 Employer (See Instructions					
	Dean		Chamberlain University	_				
	Date		D#:)	Ţ	Amount of Contribution (\$)			
	08/29/2023					\$500.00		
		Contributor address; City; State; Zip Code						
		1						
		Dichmond TV 77460						
	Dringing oog	Richmond, TX 77469	Employer (See Instructions					
	Lawyer	upation / Job title (See Instructions)	5)					
	-		West Law Firm	—				
	Date	Full name of contributor out-of-state PAC (IE)#:)		Amount of Contribution (\$)	ቀንደብ በበ		
	10/16/2023					\$250.00		
		Contributor address; City; State; Zip Code						
		1						
		Odessa, TX 79761						
-	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	⊥ s)				
	Lawyer		Childs Bishop & Whit					
	Date	Full name of contributor Out-of-state PAC (IE	D#:)	Т	Amount of Contribution (\$)			
	10/16/2023	White, Robert				\$250.00		
		Contributor address; City; State; Zip Code						
		1						
		Odessa, TX 79761						
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)				
	Lawyer		Childs Bishop & Whit					
Γ	Date	Full name of contributor out-of-state PAC (IE	D#:)	Ī	Amount of Contribution (\$)			
	07/27/2023	Zavala, Jessica				\$100.00		
		Contributor address; City; State; Zip Code	,	1				
		1						
	<u> </u>	Farmers Branch, TX 75234	Ļ					
		upation / Job title (See Instructions)	Employer (See Instructions	s)				
L	Realtor		Modtown Realty					

	The Instru	ction Guide explains how to complete t	1	Total pages Schedule A1: Sch: 37/37 Rpt: 40/75			
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
		Cassandra (Mrs.)		00087764	,		
4		5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	10/17/2023	andrews, jerry				\$500.00	
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75234					
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	lawyer			Law Office of Jerry D. A	nd	rews P.C.	
F	Date	Full name of contributor out-of-state PAC	C (ID#:)	Γ	Amount of Contribution (\$)	
	09/18/2023	kelso, rhiannon				\$250.00	
		Dallas, TX 75251					
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Attorney			Self - Kelso Law PLLC			
⊨	Date	Full name of contributor Out-of-state PAC	: (ID# [.])	Γ	Amount of Contribution (\$)	
	08/04/2023	lucas, anya		/		(1)	\$100.00
		MABANK, TX 75156-4256					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Membership	Director		TTLA			
F	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	10/08/2023	siegel, mark					\$250.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75229					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	lawyer			MJ Siegel PC			
I							
I							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 41/75					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Cassandra (Mrs.)		00087764				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date 07/26/2023	6 Full name of contributor out-of-state PAC (ID#: Hernandez, Clarabeth)	8 Amount of 9 In-kind contribution contribution (\$) description				
	7 Contributor address; City; State; Zip Code		\$5,652.39 i Kickoff event food and beverages at Stirr Addison				
	Dallas, TX 75248		I Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON					
Manager		Hernandez Law Gr					
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	· · · · · · · · · · · · · · · · · · ·				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I					
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution				
07/26/2023	Hernandez, Clarabeth		contribution (\$) description				
	Contributor address; City; State; Zip Code		\$31.74 Party City supplies for kickoff				
	Dallas, TX 75248		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)					
Manager		Hernandez Law Group					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I					

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 1/19 Rpt: 42/75	Herna	andez, Cassandra (Mrs.))				00087764			
4	Date 12/31/2023	Payee ActBl									
6	Amount (\$)	7 Payee	Payee address; City; State; Zip Code								
	\$1,438.19	366 Summer Street Somerville, MA 02144									
8	PURPOSE					(b) Description					
0	OF EXPENDITURE	Accounting/Banking									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	C	Office souç	ht		Office hel	d		
	Date	Payee	name								
	12/20/2023	Anwa	r, Fawaz								
	Amount (\$) Payee address; City; State; Zip Code										
	\$1,000.00	4057 Legacy Trl									
	OF Salaries/Wages/Contract Labor				Check if Austir	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	C	Office soug	ht		Office hel	d		
	Date	Pavee	name								
	12/19/2023	-	r, Fawaz								
	Amount (\$) \$2,000.00		address; City; Legacy Trl	State;	Zip Coo	le					
		Carro	llton, TX 75010								
	PURPOSE OF EXPENDITURE		ory (See Categories listed at the lies/Wages/Contract Lab		edule)		ı, TX	ide of Texas. Compl , officeholder living e CES			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candida	ate/Officeholder name	C	Office sou	ht		Office hel	d		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political O Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nittee Legal Services The Instruction Guide ex	e	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2		•		•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 2/19 Rpt: 43/75		Hernandez, Cassandra (Mrs.)	00087764						
4	Date 12/18/2023		Payee name Anwar, Fawaz							
6	Amount (\$)									
0	\$2,000.00		Payee address; City; State; Zip Code 4057 Legacy Trl							
			Carrollton, TX 75010							
8	PURPOSE OF		Category (See Categories listed at the top of	this sched	dule)	b) Description				
	EXPENDITURE		Salaries/Wages/Contract Labor			Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
						Campaign se	ervi	Ces		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Of	ffice soug	ht		Office held		
	Date		Payee name							
	11/17/2023 Anwar, Fawaz									
	Amount (\$) Payee address; City; State; Zip Code									
	\$1,000.00									
			5 ,							
			Carrollton, TX 75010							
PURPOSE (a OF EXPENDITURE			Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this scheo	dule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense C ES		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	Of	ffice soug	ht		Office held		
	Date		Payee name							
	11/16/2023		Anwar, Fawaz							
_	Amount (\$)		Payee address; City;	State:	Zip Coo	e				
	\$2,000.00		1057 Legacy Trl	,						
			Carrollton, TX 75010							
	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor						, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	rhead/Ren bense pense ages/Cont	imbursement tal Expense tract Labor his form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2			•		3	Filer ID (Ethics Commission Filers)		
-	Sch: 3/19 Rpt: 44/75	-	Hernandez, Cassandra (Mrs.)	00087764						
4	Date	5	Payee name							
	11/15/2023		Anwar, Fawaz							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$2,000.00		4057 Legacy Trl							
			Carrollton, TX 75010							
8	PURPOSE	(a)			(h) Dec	scription				
ľ	OF	(,	Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)	_		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Galaries, Wages, Contract Labor		Ħ	Check if Austin,	TX,	officeholder living expense		
					Ca	mpaign se	rvic	ces		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ght			Office held		
	Date		Payee name							
	10/24/2023 Anwar, Fawaz									
_	Amount (\$) Payee address; City; State; Zip Code									
	\$1,000.00 4057 Legacy Trl									
	\$1,000.00									
			Carrollton, TX 75010							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the to Salaries/Wages/Contract Labo				hedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	I ught Office held					
	Date		Payee name							
	10/23/2023		Anwar, Fawaz							
	Amount (\$)			; Zip Co	de					
	\$2,000.00		4057 Legacy Trl	, zip co	uc					
	φ2,000.00		4037 Legacy III							
			Carrollton, TX 75010							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	hedule)				de of Texas. Complete Schedule T.		
						Check if Austin, mpaign se		officeholder living expense		
-	Complete ONLY if direct		candidate/Officeholder name	Office sou	ght			Office held		
	expenditure to benefit C/OI				-					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/B Gift/Aw mittee Legal S	Expense everage Expense ards/Memorials Expense Services Instruction Guide explain	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:		· ·		•	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 4/19 Rpt: 45/75	Hernandez, Cas							
4	Date 10/20/2023	Payee name Anwar, Fawaz							
6			City <i>i</i> Stat	to: Zin Cor	0				
0	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 00.00 4057 Legacy Trl							
		Carrollton, TX 75	010						
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officehold	der name	Office soug	ht		Office he	ld	
	Date	Payee name							
	09/18/2023 Anwar, Fawaz								
	Amount (\$) Payee address; City; State; Zip Code								
	\$1,000.00	4057 Legacy Trl Carrollton, TX 75010							
	PURPOSE OF EXPENDITURE	Category _{(See Categ} Salaries/Wages/(gories listed at the top of this s Contract Labor	chedule)		ı, TX,	de of Texas. Comp officeholder living CES		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehold	der name	Office soug	ht		Office he	ld	
	Date	Payee name							
	09/15/2023	Anwar, Fawaz							
	Amount (\$) \$2,000.00	Payee address; 4057 Legacy Trl	City; Stat	te; Zip Coc	е				
		Carrollton, TX 75	010						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officehold	der name	Office soug	ht		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	e Travel Out of District /Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	ILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 5/19 Rpt: 46/75	lernandez, Cassandra (Mrs.)	00087764						
4	Date 09/12/2023	Payee name Anwar, Fawaz							
6	Amount (\$) \$2,000.00								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign services									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						
	Date	ayee name							
	08/16/2023	nwar, Fawaz							
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 0 4057 Legacy Trl							
		Carrollton, TX 75010							
	PURPOSE OF EXPENDITURE	alaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services						
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						
	Date	ayee name							
	10/25/2023	ERLIN ROSEN LLC							
	Amount (\$) \$3,358.00	ayee address; City; State; Zip Code 5 Maiden Lane Suite 1600							
		lew York, NY 10038							
	PURPOSE OF EXPENDITURE	Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Door hanger printing						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						

	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 Exp Legal Services The Instruction Guide	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILE	R NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 6/19 Rpt: 47/75		andez, Cassandra (Mrs.)					00087764		
4	Date 07/20/2023	Paye	e name LIN ROSEN LLC							
6	Amount (\$) \$1,865.00	15 N	Payee address; City; State; Zip Code 15 Maiden Lane Suite 1600							
		New	York, NY 10038							
8	PURPOSE OF EXPENDITURE	OF Printing Expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		late/Officeholder name	Of	ffice souç	ht		Office he	ld	
	Date	Paye	e name							
	12/21/2023	Beyo	ond the Slogan							
	Amount (\$) \$225.00	2710	e address; City;) Routh Creek Pkwy ardson, TX 75082	State;	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a) Cate	gory (See Categories listed at the tr sulting Expense	op of this schec	dule)		ı, TX	ide of Texas. Com , officeholder living CES		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candio	late/Officeholder name	Of	ffice soug	ht		Office he	eld	
	Date	Pave	e name							
	12/20/2023	-	ond the Slogan							
	Amount (\$) \$2,000.00		e address; City;) Routh Creek Pkwy	State;	Zip Coo	le				
		Rich	ardson, TX 75082							
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the tr sulting Expense	op of this sched	dule)		ı, TX	ide of Texas. Com , officeholder living C ES		
	Complete ONLY if direct expenditure to benefit C/OF	Candio	late/Officeholder name	Of	ffice soug	ht		Office he	ld	

	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 B Legal Services	Fees Office Overhead/Rental Expense Transportation Equipment & R Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 7/19 Rpt: 48/75		Hernandez	, Cassandra (Mrs	5.)				00087764	
4	Date	5	Payee name							
	11/17/2023		Beyond the	e Slogan						
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de			
	\$1,250.00		2710 Routh	n Creek Pkwy						
			Richardsor	i, TX 75082						
8	PURPOSE	(a)	Category (S	ee Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting						ide of Texas. Com	
									, officeholder living	j expense
							Campaign se	ervi	ces	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	Jht		Office he	eld
	Date		Payee name	9						
	11/16/2023		Beyond the	e Slogan						
	Amount (\$)		Payee addre	ess; City;	State:	Zip Co	de			
	\$2,000.00			n Creek Pkwy	,					
	φ2,000.00		2110110000	l'orceit i kwy						
			Richardsor	ı, TX 75082						
	PURPOSE	(a)	Category (S	ee Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting	Expense					ide of Texas. Com	
									, officeholder living	j expense
							Campaign se	ervi	ces	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght		Office he	eld
	experiature to benefit C/OI									
	Date		Payee name							
	11/15/2023		Beyond the	e Slogan						
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	de			
	\$2,000.00		2710 Routh	n Creek Pkwy						
			Richardsor	i, TX 75082						
	PURPOSE	(a)	Category (S	ee Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting	Expense					ide of Texas. Com	
	EXPENDITORE								, officeholder living) expense
							Campaign se	ervi	ces	
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	jht		Office he	eld
	expenditure to benefit C/OI	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Fees Food/E Gift/Av nmittee Legal	Expense Beverage Expense vards/Memorials Expense Services nstruction Guide exp	Office O Polling E Printing Salaries	verhea Expens Exper /Wage	ise s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 8/19 Rpt: 49/75		Hernandez, Cas	sandra (Mrs.)					00087764	
4	Date	5	Payee name							
	11/13/2023		Beyond the Slog	an						
6	Amount (\$)	7	Payee address;	City; S	State; Zip C	ode				
	\$2,000.00		2710 Routh Creek Pkwy							
				2						
			Richardson, TX	75082						
8	PURPOSE	(a)	Category (See Cate	gories listed at the top of th	nis schedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expe	nse					de of Texas. Com	
							Campaign se		officeholder living	expense
							oumpuignoe			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officehol	der name	Office so	ught			Office he	eld
	Date		Payee name							
	11/10/2023		Beyond the Slog	an						
	Amount (\$)		Payee address;	City; S	State; Zip C	ode				
	\$2,000.00		2710 Routh Cree	ek Pkwy						
			Richardson, TX	75082						
	PURPOSE OF EXPENDITURE	(a)	Category (See Cate Consulting Expe	gories listed at the top of th	nis schedule)	(b)		n, TX,	de of Texas. Com officeholder living C ES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehol	der name	Office so	ught			Office he	eld
	Date		Payee name							
	10/16/2023		Beyond the Slog	an						
	Amount (\$)		Payee address;	City; S	State; Zip C	ode				
	\$1,200.00		2710 Routh Cree							
			Richardson, TX	75082						
	PURPOSE OF	(a)		gories listed at the top of th	nis schedule)	(b)	Description	01.4	do of Toylog Or	alata Sahadula T
	EXPENDITURE		Consulting Expe	nse				n, TX,	de of Texas. Com officeholder living CES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehol	der name	Office so	ught			Office he	eld
⊢										

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ment/Reinbursement head/Rental Expense ense gense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2 F	LER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 9/19 Rpt: 50/75	н	ernandez, Cassandra (Mrs.))				00087764	
4	Date	5 P	ayee name						
	10/13/2023	В	eyond the Slogan						
6	Amount (\$)	7 P	ayee address; City;	State;	Zip Co	le			
	\$2,000.00	2	710 Routh Creek Pkwy						
		R	ichardson, TX 75082						
8	PURPOSE OF	(a) C	ategory (See Categories listed at the	top of this sche	edule)	b) Description			
	EXPENDITURE	C	onsulting Expense					ide of Texas. Comp , officeholder living	
						Campaign se			expense
						oumpuignot			
9	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	0)ffice sou	ht		Office he	ld
	Date	Р	ayee name						
	09/15/2023	В	eyond the Slogan						
	Amount (\$)	Р	ayee address; City;	State;	Zip Co	le			
	\$1,900.00	2	710 Routh Creek Pkwy						
			ichardson, TX 75082						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the onsulting Expense	top of this sche	edule)		ı, ТХ,	ide of Texas. Comp , officeholder living CES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office sou	ht		Office he	ld
-	Date	Р	ayee name						
	09/12/2023		eyond the Slogan						
	Amount (\$)	P	ayee address; City;	State;	Zip Co	le			
	\$2,000.00	2	710 Routh Creek Pkwy						
			ichardson, TX 75082						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the onsulting Expense	top of this sche	edule)		ı, ТХ,	ide of Texas. Comp , officeholder living CES	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	0)ffice sou	ht		Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	Expense morials Expense ion Guide explains	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 10/19 Rpt: 51/75		Hernandez, Cassandra	a (Mrs.)				00087764	
4	Date	5	Payee name						
	09/12/2023		Dallas County Electior	s Department					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le			
	\$78.50		1520 Round Table Dr						
			Dallas, TX 75247						
8	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sch	edule)	b) Description			
	OF		Office Overhead/Renta		icuaic)		outsi	ide of Texas. Compl	lete Schedule T.
	EXPENDITURE			·				, officeholder living e	expense
						Voter informa	atio	n	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me C	Office soug	ht		Office hel	d
	Date		Payee name						
	09/15/2023		Dallas Photo Lab						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le			
	\$195.00		3824 Cedar Springs #		, 1				
	+=00100								
			Dallas, TX 75219						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories lis Salaries/Wages/Contra		edule)		ı, TX	ide of Texas. Compl , officeholder living e rVICES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder na	me C	Dffice soug	ht		Office hel	d
	Date		Payee name						
	12/07/2023		Democracy Toolbox						
_	Amount (\$)		Payee address; City;	Stato	; Zip Coo				
	\$2,500.00		8852 Royal County Do		, zip cot				
	φ2,500.00		0052 Royal County DC	VVII					
			McKinney, TX 75070						
	PURPOSE		Category (See Categories lis	ted at the top of this sch	edule)	b) Description			
	OF EXPENDITURE		Consulting Expense				ı, TX	ide of Texas. Compl , officeholder living e CES	
-	Complete ONLY if direct	<u>ر</u>	andidate/Officeholder na	ne C	Office soug	ht		Office hel	d
	expenditure to benefit C/OI		analidate/Oniceriolaer IId		2000 3000				ч -
-									

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburs Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	bense Transportation Equipment & Related Expense Travel in District Travel Out of District Abor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/19 Rpt: 52/75	Hernandez, Cassandra (Mrs.)	00087764
4	Date	Payee name	
	09/13/2023	Democracy Toolbox	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,900.00	8852 Royal County Down	
		McKinney, TX 75070	
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Descript	ion
	OF EXPENDITURE		if travel outside of Texas. Complete Schedule T.
			if Austin, TX, officeholder living expense
		Campa	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/21/2023	Democracy Toolbox	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,900.00	8852 Royal County Down	
		McKinney, TX 75070	
	PURPOSE OF EXPENDITURE		ion if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ign services
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/15/2023	Edwards & Patterson Signs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,197.48	203 S Belt Line Rd	
		Irving, TX 75060	
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Descript	ion
	OF EXPENDITURE	Printing Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense gn printing
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Office O Polling E Printing Salaries	verhea Expens Expen /Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 12/19 Rpt: 53/75		Hernandez, Cassandra (Mrs.)					00087764	
4	Date	5	Payee name						
	09/13/2023		Edwards & Patterson Signs						
6	Amount (\$)	7	Payee address; City; S	State; Zip C	ode				
	\$563.44		203 S Belt Line Rd						
			Irving, TX 75060						
8	PURPOSE	(2)	_		(b)	Description			
ľ	OF	(a)	Category (See Categories listed at the top of the Printing Expense	his schedule)			outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense	
						Tshirt Printing	g		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	ught			Office held	
	Date		Payee name						
	07/18/2023		Edwards & Patterson Signs						
	Amount (\$)		Payee address; City; S	State; Zip C	ode				
	\$729.61		203 S Belt Line Rd						
			Irving, TX 75060						
	PURPOSE	(a)	Category (See Categories listed at the top of the	his schedule)	(b)	Description			
	OF EXPENDITURE		Printing Expense	· · · · · ,		Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE							, officeholder living expense	
						Yard sign pri	ntin	ng	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office held	
_	_	_							
	Date		Payee name						
	11/29/2023		FedEx Office						
	Amount (\$)			State; Zip C	ode				
	\$104.46		4568 Belt Line Rd						
			Addison, TX 75001		_				
	PURPOSE OF	(a)	Category (See Categories listed at the top of the	his schedule)	(b)	Description			
	EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
						Printing of fly			
							5		
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office so	uaht			Office held	
	expenditure to benefit C/OI			2					
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)				
	Sch: 13/19 Rpt: 54/75	Hernandez, Cassandra (Mrs.)	00087764				
4	Date 12/18/2023	Payee name Froemming, Maria					
6	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 972 Parker Dr Coppell, TX 75019					
8	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense rVICES				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/15/2023	Froemming, Maria					
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 972 Parker Dr Coppell, TX 75019					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Check if travel of the schedule)	nutside of Texas. Complete Schedule T. TX, officeholder living expense rVICES				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/20/2023	Froemming, Maria					
	Amount (\$) \$1,500.00	Payee address;City;State;ZipCode972 Parker Dr					
		Coppell, TX 75019					
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense rVICES				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expen Gift/Awards/Memorial Legal Services The Instruction G	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	rhead/Re pense pense ages/Co	eimbursement ental Expense ntract Labor this form.		Transportation I Travel in Distric Travel Out of Di	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 14/19 Rpt: 55/75			Cassandra (M	rs.)					00087764	· · ·
4	Date	5	Payee name								
	09/12/2023		Froemming	Maria							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de				
	\$2,000.00		972 Parker	Dr							
			Coppell, TX	75019							
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	nedule)	(b) De	escription			
	OF EXPENDITURE			iges/Contract L		ŕ					nplete Schedule T.
	EXPENDITORE							4		officeholder livin	g expense
							Ca	ampaign se	rvic	ces	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	C	Office sou	ght			Office h	eld
	Date		Payee name								
	08/14/2023		Froemming	Maria							
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de				
	\$1,000.00		972 Parker		etato	, <u>_</u> , p ee					
	φ1,000.00										
			Coppell, TX	75019							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed at Iges/Contract L		nedule)	(b) D€	escription Check if travel o	outsid	de of Texas. Con	nplete Schedule T.
	EXPENDITORE							4		officeholder livin	g expense
							Ca	ampaign se	rvic	ces	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(Office sou	ght			Office h	eld
-	Date		Payee name								
	09/11/2023		Graybael, T	om							
			-		01-1-	7: 0	-1 -				
	Amount (\$)		Payee addres		State	; Zip Co	de				
	\$200.00		13760 Rolli	ng Hills Lh							
			Dallas, TX 7	'5240							
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	nedule)	(b) De	escription			
	OF EXPENDITURE			iges/Contract L				4			nplete Schedule T.
	EXPENDITORE							4		officeholder livin	g expense
							Cá	ampaign se	rvic	ces	
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office h	eld
	expenditure to benefit C/OI	Н									

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pr	an Repayment/Reimbursement fice Overhead/Rental Expense Illing Expense Jaries/Wages/Contract Labor / to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	<u> </u>	· · ·	3 Filer ID (Ethics Commission Filers)			
-	Sch: 15/19 Rpt: 56/75	ernandez, Cassandra (Mrs.)		00087764			
4	Date 09/05/2023	ayee name raybael, Tom					
6	Amount (\$)	ayee address; City; State; Z	ip Code				
	\$2,000.00	3760 Rolling Hills Ln					
		allas, TX 75240	i				
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedul alaries/Wages/Contract Labor	Check if travel o	utside of Texas. Complete Schedule T. TX, officeholder living expense 'VİCES			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Offic	e sought	Office held			
	Date	ayee name					
	09/11/2023	OSEY RANCH LIBRARY					
	Amount (\$)	ayee address; City; State; Z	ip Code				
	\$50.00	700 Keller Springs Rd arrollton, TX 75006					
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedul vent Expense	Check if travel o	utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Offic	e sought	Office held			
	Date	ayee name					
	09/12/2023	P Morgan Chase					
	Amount (\$)	ayee address; City; State; Z	ip Code				
	\$1.69	70 Park Avenue					
		ew York, NY 10172	- Lee				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedul	Check if travel o	utside of Texas. Complete Schedule T. TX, officeholder living expense action Fee			
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Offic	e sought	Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
-	Sch: 16/19 Rpt: 57/75	Hernandez, Cassandra (Mrs.)	00087764
4	Date 12/26/2023	5 Payee name PhoneBurner	
6	Amount (\$) \$317.67	 Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651 	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ire monthly subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/27/2023	PhoneBurner	
	Amount (\$) \$317.67	Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92651	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ire monthly subscription
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/25/2023	PhoneBurner	
	Amount (\$) \$317.67	Payee address; City; State; Zip Code 1968 S. Coast Hwy, Suite 1800	
		Laguna Beach, CA 92651	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ire monthly subscription
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

		EXPENDITURE	CATEGORIES FOR	BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	Office Overl Polling Expe opense Printing Exp	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		•	·	3 Filer ID (Ethics Commission Filers)
-	Sch: 17/19 Rpt: 58/75	ernandez, Cassandra (Mrs.))		00087764
4	Date 09/25/2023	ayee name noneBurner			
6	Amount (\$) \$317.67	ayee address; City; 968 S. Coast Hwy, Suite 180 aguna Beach, CA 92651	State; Zip Cod 00	e	
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the ffice Overhead/Rental Expe	, ,	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense are monthly subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	nt	Office held
	Date	ayee name			
	08/25/2023	noneBurner			
	Amount (\$) \$317.67	ayee address; City; 968 S. Coast Hwy, Suite 180 aguna Beach, CA 92651	State; Zip Cod 00	e	
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the ffice Overhead/Rental Expe		Check if Austin	outside of Texas. Complete Schedule T. h, TX, officeholder living expense are monthly subscription
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	nt	Office held
	Date	ayee name			
	10/10/2023	ublic Policy Polling			
	Amount (\$) \$6,500.00	ayee address; City; 912 Highwoods Boulevard, S	State; Zip Cod Suite 201	9	
		aleigh, NC 27604	i		
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the olling Expense	top of this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ISE
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	nt	Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)
1	Total pages Schedule F1:	P FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 18/19 Rpt: 59/75	Hernandez, Cassandra (Mrs.)	00087764
4	Date 09/19/2023	Payee name RMZ Group LLC	
6	Amount (\$)	' Payee address; City; State; Zip Code	
	\$1,025.00	2026 Sorrento Lane Lewisville, TX 75077	
_	DUDDOOF		
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ction services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/21/2023	Reilly Echols Printing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$700.92	1710 S Harwood St Dallas, TX 75215	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense printing
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/09/2023	Texas Democratic Party	
-	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,300.00	PO Box 15707	
		Austin, TX 78761	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense ile Acceess
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense tical Committee Legal Services The Instruction Guide explains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
					suide explains i	now to cor	npie	te this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	((Ethics Commission Filers)
	Sch: 19/19 Rpt: 60/75		Hernandez,	, Cassandra (N	Irs.)					0008776	4	
4	Date	5	Payee name									
-	11/21/2023			es Postal Servi	CP.							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de					
	\$91.80		4900 Airpor	rt Pkwy								
			Addison, TX	X 75001								
	DUDDOOF	<u> </u>				r	(1-)					
8	PURPOSE OF	(a)		ee Categories listed at		edule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rental E	xpense			Check if travel Check if Austin			•	
								Stamps	I, IA,	Unicendider II	ving ex	Aperise .
								Stamps				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	C	Office sou	ght			Office	held	1
	experiatione to benefit C/O	п										
	Date		Payee name									
	11/14/2023		2	es Postal Servi	ce							
⊢						710 00	al a					
	Amount (\$)	1	Payee addre		State;	Zip Co	ae					
	\$149.00		4900 Airpor	rt Pkwy								
			Addison, TX	X 75001								
	PURPOSE	(a)	Category (c	ee Categories listed at			(b)	Description				
	OF	(,		head/Rental Ex		edule)	(~)	Check if travel	outsi	de of Texas. C	Comple	ete Schedule T.
	EXPENDITURE		Onice Over		xpense			Check if Austin	ı, ТХ,	officeholder li	ving e>	xpense
								Post office bo	ох			
_	Complete ONLY if direct		Candidate/Offi	iceholder name	C)ffice sou	aht			Office	held	1
	expenditure to benefit C/O		Janalaate/Oli		C		gin			Onice	neiu	A
	•											

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 1/15 Rpt: 61/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 09/28/2023	5 Payee name 23rd Tejano Democrats				
6 Amount (\$) \$20.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Bo 226534 Dallas, TX 75222				
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	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/22/2023	Payee name 23rd Tejano Democrats				
Amount (\$) \$100.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Bo 226534 Dallas, TX 75222				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/26/2023	Payee name American Legion Post 597				
Amount (\$) \$750.00	Payee address; City; State; Zip C 1024 Elm St	ode			
X Reimbursement from political contributions intended	Carrollton, TX 75006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 2/15 Rpt: 62/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission F 00087764	ilers)		
4 Date 12/08/2023	5 Payee name Annie's List				
6 Amount (\$) \$2,500.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 303277 Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Sc Check if Austin, TX, officeholder living expense Lunch Sponsorship			
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 Bandango Van Rental				
Amount (\$) \$481.80 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3324 Valley View L Dallas, TX 75062				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Sc Check if Austin, TX, officeholder living expense Van for Austin			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 09/27/2023	Payee name Blue Guardian Foundation				
Amount (\$) \$310.00	Payee address; City; State; Zip Co 3730 Ladd St	ode			
X Reimbursement from political contributions intended	Dallas, TX 75212				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Sc Check if Austin, TX, officeholder living expense Sponsorship Event			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 3/15 Rpt: 63/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 10/24/2023	5 Payee name Coppell Chamber of Commerce				
6 Amount (\$) \$374.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 708 W Main St Coppell, TX 75019				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/06/2023	Payee name Coppell Chamber of Commerce				
Amount (\$) \$70.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 708 W Main St Coppell, TX 75019				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/10/2023	Payee name DFW Muslim Bar Association				
Amount (\$) \$250.00	Payee address; City; State; Zip C 5401 TENNYSON CT	ode			
X Reimbursement from political contributions intended	Parker, TX 75002				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 4/15 Rpt: 64/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 09/13/2023	5 Payee name Dallas AFL-CIO				
6 Amount (\$) \$290.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1408 N Washington Ave Dallas, TX 75204				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/27/2023	Payee name Dallas AFL-CIO				
Amount (\$) \$350.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1408 N Washington Ave Dallas, TX 75204				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ONSORShip		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/02/2023	Payee name Dallas County Democratic Party				
Amount (\$) \$26.00	Payee address; City; State; Zip C 1414 N Washington Ave	ode			
X Reimbursement from political contributions intended	Dallas, TX 75204				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E /- Gift/Awards/Memorials Expense Printing	payment/Reinbursement verhead/Rental Expense Expense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 5/15 Rpt: 65/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764	
4 Date 09/02/2023	5 Payee name Dallas County Democratic Party		I	
6 Amount (\$) \$26.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204			
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	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date	Payee name			
09/03/2023	Dallas County Democratic Party			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$60.00	1414 N Washington Ave			
Reimbursement from political contributions intended	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date	Payee name			
10/02/2023	Dallas County Democratic Party			
Amount (\$) \$26.00	Payee address; City; State; Zip C 1414 N Washington Ave	ode		
Reimbursement from political contributions intended	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held	

POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 6/15 Rpt: 66/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 10/14/2023	5 Payee name Dallas County Democratic Party			
6 Amount (\$) \$100.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hispanic Heritage Fesitval Sponsorship		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
11/02/2023	Dallas County Democratic Party			
Amount (\$) \$26.00	Payee address; City; State; Zip C 1414 N Washington Ave	ode		
X political contributions intended	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sustain Member Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
11/14/2023	Dallas County Democratic Party			
Amount (\$) \$750.00	Payee address; City; State; Zip C 1414 N Washington Ave	ode		
X Reimbursement from political contributions intended	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate Filing Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 7/15 Rpt: 67/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 12/02/2023	5 Payee name Dallas County Democratic Party			
6 Amount (\$) \$26.00				
Reimbursement from political contributions intended	1414 N Washington Ave Dallas, TX 75204			
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sustain Member Fee		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
12/20/2023	Dallas County Democratic Party			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$5,000.00				
Reimbursement from political contributions intended	Dallas, TX 75204			
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense JJ Dinner Sponsorship		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
09/20/2023	Dallas Democratic Forum			
Amount (\$) \$70.00	Payee address; City; State; Zip C P.O. Box 634	ode		
X Reimbursement from political contributions intended	Dallas, TX 75221			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 8/15 Rpt: 68/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764			
4 Date 12/22/2023	5 Payee name Dallas Democratic Forum				
6 Amount (\$) \$75.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 634 Dallas, TX 75221				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 08/01/2023	Payee name Dallas Photo Lab				
Amount (\$) \$195.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 3824 Cedar Springs #169 Dallas, TX 75219	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photos from Kickoff Event			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 08/20/2023	Payee name LGBTQ Dallas Bar				
Amount (\$) \$350.00	Payee address; City; State; Zip C 2101 Ross Ave	ode			
X Reimbursement from political contributions intended	Dallas, TX 75201				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship Event			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 9/15 Rpt: 69/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 08/24/2023	5 Payee name Lambda Legal				
6 Amount (\$) \$1,500.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3500 Oak Lawn Avenue, Suite 500 Dallas, TX 75219				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 11/19/2023	Payee name Landon Winery				
Amount (\$) \$87.29 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 415 S. Main St. Grapevine, TX 76501				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meet & Greet		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/02/2023	Payee name Metrocrest Chamber of Commerce				
Amount (\$) \$375.00	Payee address; City; State; Zip C 1671 S Broadway St Office 7	Code			
X Reimbursement from political contributions intended	Carrollton, TX 75006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 10/15 Rpt: 70/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 08/02/2023	5 Payee name Metrocrest Chamber of Commerce			
6 Amount (\$) \$25.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1671 S Broadway St Office 7 Carrollton, TX 75006			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
08/23/2023	Metrocrest Chamber of Commerce			
Amount (\$) \$90.00	Payee address; City; State; Zip Code			
X Reimbursement from political contributions intended	Carrollton, TX 75006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Chamber Lunch Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
09/28/2023	Metrocrest Chamber of Commerce			
Amount (\$) \$50.00	Payee address; City; State; Zip C 1671 S Broadway St Office 7	code		
X Reimbursement from political contributions intended	Carrollton, TX 75006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense txpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 11/15 Rpt: 71/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764			
4 Date 10/09/2023	5 Payee name Metrocrest Chamber of Commerce	5 Payee name			
6 Amount (\$) \$50.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1671 S Broadway St Office 7 Carrollton, TX 75006				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
12/11/2023	Metrocrest Democrats				
Amount (\$) \$30.00 Reimbursement from	Payee address; City; State; Zip Code P.O. Box 476				
X political contributions intended	Coppell, TX 75019				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Fee			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
12/11/2023	Metrocrest Democrats				
Amount (\$) \$30.00	Payee address; City; State; Zip C P.O. Box 476	ode			
X Reimbursement from political contributions intended	Coppell, TX 75019				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement rerhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 12/15 Rpt: 72/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764		
4 Date 10/29/2023	5 Payee name North Texas Democrats				
6 Amount (\$) \$100.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1320 Rawlins St. Dallas, TX 75219				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/25/2023	Payee name Party City				
Amount (\$) \$17.86 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2540 N Josey Ln Carrollton, TX 75006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
Date 09/26/2023	Payee name Party City				
Amount (\$) \$11.91	Payee address; City; State; Zip Code 2540 N Josey Ln 2540 N Josey Ln				
X Reimbursement from political contributions intended	Carrollton, TX 75006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	bayment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 13/15 Rpt: 73/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3	Filer ID (Ethics Commission Filers) 00087764		
4 Date 10/13/2023	5 Payee name Planned Parenthood Texas Votes				
6 Amount (\$) \$250.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 41646 Austin, TX 78704				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit				
Date	Payee name				
10/18/2023	Progressive Democrats				
Amount (\$) \$30.00 Reimbursement from political contributions	Payee address; City; State; Zip Code P.O. Box 150064				
intended	Grand Rapids, MI 49515				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date	Payee name				
07/26/2023	Stirr Addison				
Amount (\$) \$119.81	Payee address; City; State; Zip Code 5100 Belt Line Rd Ste 540				
X Reimbursement from political contributions intended	Dallas, TX 75254				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Solicitation/Fundraising Expense overhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District SvWages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 14/15 Rpt: 74/75	2 FILER NAME Hernandez, Cassandra (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087764			
4 Date 08/20/2023	5 Payee name Texas Democratic Party				
6 Amount (\$) \$100.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Event Ticket			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 08/20/2023	Payee name Texas Democratic Party				
Amount (\$) \$100.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Dem Women Event Ticket			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/17/2023	Payee name Thirsty Lion				
Amount (\$) \$99.24	Payee address; City; State; Zip Code 5225 Belt Line Road				
X Reimbursement from political contributions intended	Dallas, TX 75254				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Addison Meet & Greet			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Expense Printing Expense Printing Expense Printing Expense Office Ov	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 15/15 Rpt: 75/75	2 FILER NAME Hernandez, Cassandra (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087764			
4	Date 07/18/2023	5 Payee name USPS		•			
6	Amount (\$) \$71.00	7 Payee address; City; State; Zip Code 4900 Airport Pkwy					
	X Reimbursement from political contributions intended	Addison, TX 75001					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			