

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00064041	2 Total pages filed: 252	OFFICE USE ONLY	
3 COMMITTEE NAME NCHA's Texas Events PAC	Date Received ELECTRONICALLY FILED 01/17/2024		
4 TREASURER NAME Hayes, Deanna M. (Ms.)	Date Hand-delivered or Date Postmarked		
5 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Imaged
6 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023

7 EXPLANATION OF CORRECTION
The occupation of a few contributors did not import to the report. This corrects the original report.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Ms. Deanna M. Hayes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00064041	2 Total pages filed: 252
3 COMMITTEE NAME NCHA's Texas Events PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/17/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 260 Bailey Ave. Fort Worth, TX 76107		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Deanna M.		
	NICKNAME LAST SUFFIX Hayes		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1841 S Lakeline Blvd Ste 101 No 110 CEDAR PARK, TX 78613		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1841 S Lakeline Blvd Ste 101 No 110 Cedar Park, TX 78613		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 217-5814		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME NCHA's Texas Events PAC	13 Filer ID (Ethics Commission Filers) 00064041
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported See Schdule F
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 2,905.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 165,387.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 137,641.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 122,122.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Ms. Deanna M. Hayes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME NCHA's Texas Events PAC		18 Filer ID (Ethics Commission Filers) 00064041
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 165,387.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 137,641.70
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/233 Rpt: 5/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 3G'S PARTNERSHIP <hr/> 6 Contributor address; City; State; Zip Code CLAREMORE, OK 74017	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 3G'S PARTNERSHIP <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 R RANCH <hr/> Contributor address; City; State; Zip Code JACKSON, WY 83001	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AASNESS, CARY <hr/> Contributor address; City; State; Zip Code DALTON, MN 56324	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, AUSTIN <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/233 Rpt: 6/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, DUSTIN <hr/> 6 Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MIKE <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISSON, SUSAN <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGALOS, PETE <hr/> Contributor address; City; State; Zip Code NIPOMO, CA 93444	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHLIN, NATE <hr/> Contributor address; City; State; Zip Code PAYSON, UT 84651	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/233 Rpt: 7/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHLIN, NATE <hr/> 6 Contributor address; City; State; Zip Code PAYSON, UT 84651	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, MARK <hr/> Contributor address; City; State; Zip Code PURCELL, OK 73080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, RUSSELL <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79707	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, RUSSELL <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEDO HORSES <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79101	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/233 Rpt: 8/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, AMBER <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRENDA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-8571	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRENDA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-8571	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CLINT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, DAISY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/233 Rpt: 9/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, RUSSELL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, RUSSELL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, RUSSELL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, TANJA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, TANJA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/233 Rpt: 10/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMMANN, JOE <hr/> 6 Contributor address; City; State; Zip Code WESTMORELAND, KS 66549	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMOS, SCOTT <hr/> Contributor address; City; State; Zip Code LOMA, CO 81524	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON CATTLE <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77902	Amount of Contribution (\$) \$460.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON CATTLE CO <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77902	Amount of Contribution (\$) \$380.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENTA, LIZ <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/233 Rpt: 11/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENTA, LIZ <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENTA, LIZ <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, BRANDON <hr/> Contributor address; City; State; Zip Code AZTEC, NM 87410	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, BRENDA <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448-9761	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, AUSTRIA <hr/> Contributor address; City; State; Zip Code TERRELL, TX 75160	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/233 Rpt: 12/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, JUSTIN <hr/> 6 Contributor address; City; State; Zip Code PADUCAH, KY 42001	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, LINDY <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATWOOD, BILLY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYLESWORTH, BILLIE <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYLESWORTH, BILLIE <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/233 Rpt: 13/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACA, TYE <hr/> 6 Contributor address; City; State; Zip Code VEGA, TX 79092	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BADLEY, PERRY <hr/> Contributor address; City; State; Zip Code PONCA CITY, OK 74604	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, MELISSA <hr/> Contributor address; City; State; Zip Code INVERNESS, FL 34450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, GREG <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, GREG <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/233 Rpt: 14/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MICHAEL <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDACCHINO, CHERI <hr/> Contributor address; City; State; Zip Code SANTA YNEZ, CA 93460	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, JOHN <hr/> Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, WAYNE <hr/> Contributor address; City; State; Zip Code LOVINGTON, NM 88260	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/233 Rpt: 15/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNER, MACALL <hr/> 6 Contributor address; City; State; Zip Code MILLSAP, TX 76066	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, ADAN <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, ALICIA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, COOKIE <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89131	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR D RANCH <hr/> Contributor address; City; State; Zip Code BENJAMIN, UT 84651	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/233 Rpt: 16/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR D RANCH <hr/> 6 Contributor address; City; State; Zip Code BENJAMIN, UT 84651	7 Amount of Contribution (\$) \$180.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR RR RANCHES <hr/> Contributor address; City; State; Zip Code WESTLAKE, TX 76262	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBOSA, RENATO E REZENDE <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER RANCH CH <hr/> Contributor address; City; State; Zip Code MADILL, OK 73446	Amount of Contribution (\$) \$380.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER RANCH CH <hr/> Contributor address; City; State; Zip Code MADILL, OK 73446	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/233 Rpt: 17/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, GARY <hr/> 6 Contributor address; City; State; Zip Code MADILL, OK 73446	7 Amount of Contribution (\$) \$410.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, JEFFREY <hr/> Contributor address; City; State; Zip Code BOSWELL, OK 74727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW LIVESTOCK <hr/> Contributor address; City; State; Zip Code GILLETTE, WY 82718	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW LIVESTOCK <hr/> Contributor address; City; State; Zip Code GILLETTE, WY 82718	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW LIVESTOCK <hr/> Contributor address; City; State; Zip Code GILLETTE, WY 82718	Amount of Contribution (\$) \$155.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/233 Rpt: 18/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, JEFF <hr/> 6 Contributor address; City; State; Zip Code WILTON, CA 95693	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, JENNIFER <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, JACK <hr/> Contributor address; City; State; Zip Code GODLEY, TX 76044	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, LUKE <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, DAVID <hr/> Contributor address; City; State; Zip Code FRANKLIN, GA 30217	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/233 Rpt: 19/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, BRYAN <hr/> 6 Contributor address; City; State; Zip Code SPRING CREEK, NV 89815	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARWICK, JEREMY <hr/> Contributor address; City; State; Zip Code BLUFF DALE, TX 76433	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARWICK, JEREMY <hr/> Contributor address; City; State; Zip Code BLUFF DALE, TX 76433	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASADRE, CELENA <hr/> Contributor address; City; State; Zip Code HARRISON, TN 37341	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, ABRIAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/233 Rpt: 20/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, JOHNNY <hr/> 6 Contributor address; City; State; Zip Code WILLS POINT, TX 75169-0226	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAMER, ASHLEY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEASLEY, JULIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, AL 36117	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDNAR, DARREN <hr/> Contributor address; City; State; Zip Code EL PASO, AR 72045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECHFORK RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$380.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/233 Rpt: 21/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECHFORK RANCH <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECHFORK RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECHFORK RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$545.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, JACK <hr/> Contributor address; City; State; Zip Code DULUTH, MN 55803	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SAVANNAH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/233 Rpt: 22/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, STEVE <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, STEVE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLE TERRE RANCH <hr/> Contributor address; City; State; Zip Code CORINTH, MS 38834	Amount of Contribution (\$) \$390.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLE TERRE RANCH <hr/> Contributor address; City; State; Zip Code CORINTH, MS 38834	Amount of Contribution (\$) \$720.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLEFEUILLE, MOLLY <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/233 Rpt: 23/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLO, DAVID MORALES <hr/> 6 Contributor address; City; State; Zip Code MIAMI, FL 33137	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELOW, JOHNNY <hr/> Contributor address; City; State; Zip Code WHITEWATER, MO 63785	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDELE, DENISE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDELE, DENISE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENENATI, JEANINE <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/233 Rpt: 24/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, TATE <hr/> 6 Contributor address; City; State; Zip Code HEREFORD, TX 79045	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGER, NORDA <hr/> Contributor address; City; State; Zip Code SIMONTON, TX 77476	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGERON, STEPHEN PAUL <hr/> Contributor address; City; State; Zip Code NEW ROADS, LA 70760-4105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEUTENMILLER, ANGELA <hr/> Contributor address; City; State; Zip Code HARRISBURG, MO 65256	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEHLE, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH VERNON, IN 47265	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/233 Rpt: 25/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINGHAM, ZACH	7 Amount of Contribution (\$) \$115.00
6 Contributor address; City; State; Zip Code NORTH VERNON, IN 47265		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINGHAM, ZACH	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code NORTH VERNON, IN 47265		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRKHEAD, DARRELL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WINFIELD, MO 63389		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEFF	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT RANCH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89131		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/233 Rpt: 26/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT RANCH <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89131	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT RANCH <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89131	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT RANCH <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89131	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT SPRINGS RANCH <hr/> Contributor address; City; State; Zip Code STAVENSVILLE, MT 59870	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, AUSTIN <hr/> Contributor address; City; State; Zip Code SEYMOUR, TX 76380	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/233 Rpt: 27/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, AUSTIN <hr/> 6 Contributor address; City; State; Zip Code SEYMOUR, TX 76380	7 Amount of Contribution (\$) \$375.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANKS, TODD <hr/> Contributor address; City; State; Zip Code CELINA, TX 75009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DARREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DARREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DARREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/233 Rpt: 28/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAZEK, ELLA <hr/> 6 Contributor address; City; State; Zip Code FORT LUPTON, CO 80621	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, LYNN <hr/> Contributor address; City; State; Zip Code CRESCENT, OK 73028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, JACK <hr/> Contributor address; City; State; Zip Code OOLOGAH, OK 74053	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONDS RANCH <hr/> Contributor address; City; State; Zip Code SAGINAW, TX 76179	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONGIORNO, GEORGE <hr/> Contributor address; City; State; Zip Code DARIEN, CT 06820	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/233 Rpt: 29/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOONE'S FARM <hr/> 6 Contributor address; City; State; Zip Code BRAZORIA, TX 77422	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOONE'S FARM <hr/> Contributor address; City; State; Zip Code BRAZORIA, TX 77422	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUTONNET, TROY <hr/> Contributor address; City; State; Zip Code SALINAS, CA 93908-9302	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOZEMAN, STUART <hr/> Contributor address; City; State; Zip Code IDALOU, TX 79329	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOZEMAN, STUART <hr/> Contributor address; City; State; Zip Code IDALOU, TX 79329	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/233 Rpt: 30/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADSHAW, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code GRANT, OK 74738	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAZZEL, RAY <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602-7515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREGMAN LAND AND LIVESTOCK <hr/> Contributor address; City; State; Zip Code GREEN CASTLE, MO 63544	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENGARD CUTTING HORSES <hr/> Contributor address; City; State; Zip Code JONESBORO, AR 72403	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENGARD, CHRIS <hr/> Contributor address; City; State; Zip Code PARAGOULD, AR 72450	Amount of Contribution (\$) \$340.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/233 Rpt: 31/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRETCHES, DAVID	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, CARA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code JAY, OK 74346		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKE SPUR RANCHES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CROWLEY, TX 76036		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKEN ARROW LIVESTOCK	Amount of Contribution (\$) \$140.00
Contributor address; City; State; Zip Code LUSK, WY 82225		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKEN K PROPERTIES	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code STATESVILLE, NC 28677		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/233 Rpt: 32/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUSSARD, SAMMY <hr/> 6 Contributor address; City; State; Zip Code NEW IBERIA, LA 70563	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ASHTYN <hr/> Contributor address; City; State; Zip Code CULLEOKA, TN 38451	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ASHTYN <hr/> Contributor address; City; State; Zip Code CULLEOKA, TN 38451	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JEFFREY <hr/> Contributor address; City; State; Zip Code ORWELL, OH 44076-9377	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LAURA <hr/> Contributor address; City; State; Zip Code MALVERN, AR 72104	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/233 Rpt: 33/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RENE	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code BATON ROUGE, LA 70821	
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RICKY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code WARRENTON, VA 20186	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RICKY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code WARRENTON, VA 20186	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROB A	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code STINNETT, TX 79083	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNLEE, ELAINE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code CLARENDON, TX 79226	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/233 Rpt: 34/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMBAUGH RANCHES <hr/> 6 Contributor address; City; State; Zip Code ALEDO, TX 76008	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMLEY CREEK RANCH <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75771	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, CHARLES <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, JENNIFER <hr/> Contributor address; City; State; Zip Code ZANESVILLE, OH 43701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, KAMERON <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/233 Rpt: 35/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK CREEK QUARTER HORSES <hr/> 6 Contributor address; City; State; Zip Code NEMO, TX 76070	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, JAMES <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, KELLI <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLEY, BRADLEY <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDGE, MATTHEW TAYLOR <hr/> Contributor address; City; State; Zip Code WHITT, TX 76490-0015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/233 Rpt: 36/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUENA VISTA PERFORMANCE HORSES <hr/> 6 Contributor address; City; State; Zip Code ROLLING HILLS, CA 90274	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUITRON, LAUREN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULL, ANGELA <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLINGER, TREY <hr/> Contributor address; City; State; Zip Code KENTWOOD, LA 70444	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, TREVER <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/233 Rpt: 37/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, TREVER <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURBA, KELLI <hr/> Contributor address; City; State; Zip Code ALTOONA, FL 32702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, CHARLES <hr/> Contributor address; City; State; Zip Code CHATSWORTH, GA 30705	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, CHARLES <hr/> Contributor address; City; State; Zip Code CHATSWORTH, GA 30705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, DAWSON <hr/> Contributor address; City; State; Zip Code TARZAN, TX 79783	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/233 Rpt: 38/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MITCH <hr/> 6 Contributor address; City; State; Zip Code BEGGS, OK 74421-2299	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURRIS, ADELIA <hr/> Contributor address; City; State; Zip Code HEALDTON, OK 73438	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C HEART RANCH <hr/> Contributor address; City; State; Zip Code ARDMORE, OK 73401	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C WOLF RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C WOLF RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$170.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/233 Rpt: 39/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C4 <hr/> 6 Contributor address; City; State; Zip Code HAMPSTEAD, NC 28443	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA, BECKY <hr/> Contributor address; City; State; Zip Code KAUFMAN, TX 75142	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA, BECKY <hr/> Contributor address; City; State; Zip Code KAUFMAN, TX 75142	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAHAN, GAVIN <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, KENNETH <hr/> Contributor address; City; State; Zip Code STRATFORD, OK 74872	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/233 Rpt: 40/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANNON, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTER, JEFF <hr/> Contributor address; City; State; Zip Code JONESVILLE, NC 28642	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARGILE, JOE MARK <hr/> Contributor address; City; State; Zip Code CROSBYTON, TX 79322	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLTON, DANIELLE <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, RICHARD <hr/> Contributor address; City; State; Zip Code KEMP, TX 75143	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/233 Rpt: 41/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, RYDER <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, RUSS <hr/> Contributor address; City; State; Zip Code FORNEY, TX 75126	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLLS CUTTING <hr/> Contributor address; City; State; Zip Code Dennis, TX 76439	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLLS CUTTING <hr/> Contributor address; City; State; Zip Code Dennis, TX 76439	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASCADE LAND AND CATTLE <hr/> Contributor address; City; State; Zip Code EAGLE POINT, OR 97524	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/233 Rpt: 42/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CELIA RUSSO & CAROL BELL PARTNERSHIP <hr/> 6 Contributor address; City; State; Zip Code COLDEN, NY 14033	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, DAWN <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85248-4902	Amount of Contribution (\$) \$390.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPPELL, ALAN <hr/> Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233-3719	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER INVESTMENTS <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, ALANNAH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/233 Rpt: 43/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, KELLE <hr/> 6 Contributor address; City; State; Zip Code MILLSAP, TX 76066	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, MICA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-1812	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, SCOTT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHATTERTON, STEVE <hr/> Contributor address; City; State; Zip Code CATLETTSBURG, KY 41129	Amount of Contribution (\$) \$340.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEETHAM, MELINDA <hr/> Contributor address; City; State; Zip Code GODLEY, TX 76044	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/233 Rpt: 44/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESTNUT RIDGE <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIARELLI, CARLY <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIASSON, CHUCKIE <hr/> Contributor address; City; State; Zip Code LUMBERTON, MS 39455	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MARK <hr/> Contributor address; City; State; Zip Code BOWIE, TX 76230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, THOMAS <hr/> Contributor address; City; State; Zip Code SAGINAW, TX 76179	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/233 Rpt: 45/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOCRON-AROCHA, MARCOS <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$290.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRUSTAWKA, E <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE Y RANCH <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE Y RANCH <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, BECKY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/233 Rpt: 46/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, COOPER	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, KAMRYN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SUMMERDALE, AL 36580		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, LISA	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code MILLSAP, TX 76066		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, RODGER	Amount of Contribution (\$) \$355.00
Contributor address; City; State; Zip Code FOUNTAIN INN, SC 29644-9727		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, RODGER	Amount of Contribution (\$) \$115.00
Contributor address; City; State; Zip Code FOUNTAIN INN, SC 29644-9727		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/233 Rpt: 47/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE BUTTE RANCH <hr/> 6 Contributor address; City; State; Zip Code BEND, OR 97703	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE BUTTE RANCH <hr/> Contributor address; City; State; Zip Code BEND, OR 97703	Amount of Contribution (\$) \$360.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEAR CREEK PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code ROSSTON, TX 76263	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEAR CREEK PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code ROSSTON, TX 76263	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENTS, PAM <hr/> Contributor address; City; State; Zip Code CAVE CREEK, AZ 85331	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/233 Rpt: 48/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COALSON ACRES <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$235.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, KATHERINE <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, KATHERINE <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, COLTON <hr/> Contributor address; City; State; Zip Code TULIA, TX 79088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, DICK <hr/> Contributor address; City; State; Zip Code TULIA, TX 79088	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/233 Rpt: 49/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, DICK <hr/> 6 Contributor address; City; State; Zip Code TULIA, TX 79088	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, JIM <hr/> Contributor address; City; State; Zip Code TULIA, TX 79088-4907	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, WILLIAM <hr/> Contributor address; City; State; Zip Code BATESVILLE, MS 38606	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, NED <hr/> Contributor address; City; State; Zip Code MILLEDGEVILLE, GA 31061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, NED <hr/> Contributor address; City; State; Zip Code MILLEDGEVILLE, GA 31061	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/233 Rpt: 50/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, RALPH <hr/> 6 Contributor address; City; State; Zip Code DOWNSVILLE, LA 71234-3510	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL <hr/> Contributor address; City; State; Zip Code BOLIGEE, AL 35443	Amount of Contribution (\$) \$1,150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL <hr/> Contributor address; City; State; Zip Code BOLIGEE, AL 35443	Amount of Contribution (\$) \$1,125.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL <hr/> Contributor address; City; State; Zip Code BOLIGEE, AL 35443	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, PATRICK <hr/> Contributor address; City; State; Zip Code LOLN, IL 62656	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/233 Rpt: 51/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, PATRICK <hr/> 6 Contributor address; City; State; Zip Code LOLN, IL 62656	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, ROBERT <hr/> Contributor address; City; State; Zip Code AIKEN, SC 29803	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONN, KELSEY <hr/> Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONN, KELSEY <hr/> Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, AARON <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448-7410	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/233 Rpt: 52/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, RONALD <hr/> 6 Contributor address; City; State; Zip Code BRYSON CITY, NC 28713	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JANET <hr/> Contributor address; City; State; Zip Code CLARENDON, TX 79226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JENNIFER <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JENNIFER <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$550.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, LARRY <hr/> Contributor address; City; State; Zip Code ORLEANS, IN 47452-0245	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/233 Rpt: 53/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPINI, MARGARET <hr/> 6 Contributor address; City; State; Zip Code KUNA, ID 83634-1519	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPINI, MARGARET <hr/> Contributor address; City; State; Zip Code KUNA, ID 83634-1519	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/233 Rpt: 54/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, MELISSA <hr/> 6 Contributor address; City; State; Zip Code CANYON, TX 79015-6372	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, ZEB <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015-6372	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTELLO, MINDY <hr/> Contributor address; City; State; Zip Code KAUFMAN, TX 75142	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUNTRY BOY SYNDICATE <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUTINHO NOGUEIRA, OLAVO <hr/> Contributor address; City; State; Zip Code BENTONVILLE, AR 72712	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/233 Rpt: 55/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN RANCH <hr/> 6 Contributor address; City; State; Zip Code ARDMORE, OK 73402	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN RANCH <hr/> Contributor address; City; State; Zip Code ARDMORE, OK 73402	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWS & HORSES ETC <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CHRIS <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-0201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CHRISTINA <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448-7217	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/233 Rpt: 56/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, THAD	7 Amount of Contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code PURCELL, OK 73080-9630		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COYOTE ROCK RANCH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code TERREBONNE, OR 97760		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, JIM	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code LEXINGTON, NE 68850-5513		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, MARYLIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LEXINGTON, NE 68850-5513		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT SAND & GRAVEL	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code CROCKETT, TX 75835		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/233 Rpt: 57/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT SAND & GRAVEL <hr/> 6 Contributor address; City; State; Zip Code CROCKETT, TX 75835	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROMER, MORGAN <hr/> Contributor address; City; State; Zip Code TEMPLETON, CA 93465	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSSEN, LISA <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, MARY <hr/> Contributor address; City; State; Zip Code DIMMITT, TX 79027	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, MARY <hr/> Contributor address; City; State; Zip Code DIMMITT, TX 79027	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/233 Rpt: 58/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, TRYSTAN <hr/> 6 Contributor address; City; State; Zip Code DIMMITT, TX 79027	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, TRYSTAN <hr/> Contributor address; City; State; Zip Code DIMMITT, TX 79027	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, TRYSTAN <hr/> Contributor address; City; State; Zip Code DIMMITT, TX 79027	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWN RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPLER BROTHERS <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76305	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/233 Rpt: 59/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CT CUTTING HORSES <hr/> 6 Contributor address; City; State; Zip Code OVERBROOK, OK 73453	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CT CUTTING HORSES <hr/> Contributor address; City; State; Zip Code OVERBROOK, OK 73453	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, DIANA <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOME, AR 72653	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, JULIE <hr/> Contributor address; City; State; Zip Code KRUM, TX 76249	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D & S EQUINE <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048-7508	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/233 Rpt: 60/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANGELMAYR, MARY <hr/> 6 Contributor address; City; State; Zip Code MUNSTER, TX 76252-3301	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER <hr/> Contributor address; City; State; Zip Code CRESTVIEW, FL 32536	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER <hr/> Contributor address; City; State; Zip Code CRESTVIEW, FL 32536	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER <hr/> Contributor address; City; State; Zip Code CRESTVIEW, FL 32536	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARE, LAURA <hr/> Contributor address; City; State; Zip Code PURCELL, OK 73080	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/233 Rpt: 61/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, VE <hr/> 6 Contributor address; City; State; Zip Code GREELEY, CO 80631	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, BOBBIE KAY <hr/> Contributor address; City; State; Zip Code TEMPLETON, CA 93465	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DWAYNE <hr/> Contributor address; City; State; Zip Code PELAHATCHIE, MS 39145	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JAMES CHARLES <hr/> Contributor address; City; State; Zip Code LAKIN, KS 67860-9802	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KIM <hr/> Contributor address; City; State; Zip Code PEASTER, TX 76485	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/233 Rpt: 62/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARTY <hr/> 6 Contributor address; City; State; Zip Code CROSBYTON, TX 79322	7 Amount of Contribution (\$) \$190.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON, JACKIE <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE CORDOVA, RUSS <hr/> Contributor address; City; State; Zip Code GROESBECK, TX 76642-0517	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE CORDOVA, RUSS <hr/> Contributor address; City; State; Zip Code GROESBECK, TX 76642-0517	Amount of Contribution (\$) \$305.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE FILIPPO, GIOVANNI <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33178	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/233 Rpt: 63/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE FILIPPO, GIOVANNI <hr/> 6 Contributor address; City; State; Zip Code MIAMI, FL 33178	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEEP IN THE DIRT ENTERPRISES <hr/> Contributor address; City; State; Zip Code MILLICAN, TX 77866	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELEEUW, PETER <hr/> Contributor address; City; State; Zip Code PAIGE, TX 78659	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELONG, GREG <hr/> Contributor address; City; State; Zip Code FORNEY, TX 75126	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELONG, GREG <hr/> Contributor address; City; State; Zip Code FORNEY, TX 75126	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/233 Rpt: 64/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWITT, CRYSTAL <hr/> 6 Contributor address; City; State; Zip Code ORTONVILLE, MI 48462	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMOND LAND & CATTLE <hr/> Contributor address; City; State; Zip Code SHREVEPORT, LA 71101	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMOND LK CUTTING HORSES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, FRANK <hr/> Contributor address; City; State; Zip Code RUSKIN, FL 33570	Amount of Contribution (\$) \$625.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, MICHAELLA <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/233 Rpt: 65/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITCH, DAVID <hr/> 6 Contributor address; City; State; Zip Code PILOT POINT, TX 76258	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBELS, ADAM <hr/> Contributor address; City; State; Zip Code BLANCHARD, OK 73010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOING, VERLIE <hr/> Contributor address; City; State; Zip Code JACKSBORO, TX 76458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOING, VERLIE <hr/> Contributor address; City; State; Zip Code JACKSBORO, TX 76458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMANN, DEAN <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/233 Rpt: 66/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOPUCH, PAUL <hr/> 6 Contributor address; City; State; Zip Code HERMANN, MO 65041	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSS, PHIL <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSS, PHIL <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE DOVE RANCH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76121	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE NICKEL PRF HORSES <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/233 Rpt: 67/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLESS, GRADY <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76305	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, GLENN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, GLENN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, REBECCA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$280.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, MELISSA <hr/> Contributor address; City; State; Zip Code PAWHUSKA, OK 74056	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/233 Rpt: 68/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, MELISSA <hr/> 6 Contributor address; City; State; Zip Code PAWHUSKA, OK 74056	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, MELISSA <hr/> Contributor address; City; State; Zip Code PAWHUSKA, OK 74056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, MELISSA <hr/> Contributor address; City; State; Zip Code PAWHUSKA, OK 74056	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFF CATTLE <hr/> Contributor address; City; State; Zip Code HOBART, OK 73651	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFURRENA, SHONA <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$725.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/233 Rpt: 69/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNHAM, JAN <hr/> 6 Contributor address; City; State; Zip Code LOOMIS, CA 95650	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURANGO PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WOODWARD, OK 73801	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURANT, JERRY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086-0839	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DVORAK, ALYSSA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EARNHEART, KELLE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-6621	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/233 Rpt: 70/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASTERLY, ZACH <hr/> 6 Contributor address; City; State; Zip Code STRAFFORD, MO 65757	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, MICHAEL <hr/> Contributor address; City; State; Zip Code DANVILLE, IN 46122	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, MICHAEL <hr/> Contributor address; City; State; Zip Code DANVILLE, IN 46122	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECHETA LIVESTOCK <hr/> Contributor address; City; State; Zip Code RENO, NV 89521	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, ROSS <hr/> Contributor address; City; State; Zip Code LOUISVILLE, NE 68037	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/233 Rpt: 71/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EE RANCHES <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EE RANCHES <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EL CID LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88102-1907	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EL CID LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88102-1907	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, LIBBY <hr/> Contributor address; City; State; Zip Code THACKERVILLE, OK 73459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/233 Rpt: 72/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELROD, RUSSELL <hr/> 6 Contributor address; City; State; Zip Code GRAHAM, TX 76450	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERSON, BILLY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDRESS, NICOLE <hr/> Contributor address; City; State; Zip Code TYRONE, PA 16686	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EQUINE GLOBAL INVESTMENT CORP <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008-2918	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERENBERG, LIANA <hr/> Contributor address; City; State; Zip Code SANTA YNEZ, CA 93460	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/233 Rpt: 73/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EZELL, KIM <hr/> 6 Contributor address; City; State; Zip Code PERRIN, TX 76486	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EZELL, KIM <hr/> Contributor address; City; State; Zip Code PERRIN, TX 76486	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EZELL, KIM <hr/> Contributor address; City; State; Zip Code PERRIN, TX 76486	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRIS, MIKE <hr/> Contributor address; City; State; Zip Code MADISONVILLE, TX 77864-0277	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAZENDA BARRINHA <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/233 Rpt: 74/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEHRMAN FARM <hr/> 6 Contributor address; City; State; Zip Code LOLNTON, GA 30817	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, STEVE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, STEVE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$96.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIER, RYLEIGH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-6441	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, KYLE <hr/> Contributor address; City; State; Zip Code HEATH, TX 75032	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/233 Rpt: 75/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOWERS, STAN <hr/> 6 Contributor address; City; State; Zip Code DEXTER, MO 63841-8469	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, SEAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLAND, JENNIFER CHRISTMANN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLAND, JENNIFER CHRISTMANN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLSOM, EDGAR <hr/> Contributor address; City; State; Zip Code BAXLEY, GA 31513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/233 Rpt: 76/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORST RANCH <hr/> 6 Contributor address; City; State; Zip Code WAURIKA, OK 73573-0247	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, BILLY <hr/> Contributor address; City; State; Zip Code EL DORADO, AR 71731-2268	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, BILLY <hr/> Contributor address; City; State; Zip Code EL DORADO, AR 71731-2268	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, BILLY <hr/> Contributor address; City; State; Zip Code EL DORADO, AR 71731-2268	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCOIS, LEE <hr/> Contributor address; City; State; Zip Code MURCHISON, TX 75778	Amount of Contribution (\$) \$370.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/233 Rpt: 77/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCOIS, LEE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code MURCHISON, TX 75778		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCOIS, LEE	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code MURCHISON, TX 75778		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCOIS, LEE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MURCHISON, TX 75778		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANZ, ALEX	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code STILWELL, KS 66085		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEBORN, MARY BENSON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TERREBONNE, OR 97760		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/233 Rpt: 78/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEBORN, MARY BENSON <hr/> 6 Contributor address; City; State; Zip Code TERREBONNE, OR 97760	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, L (CHANTEE) <hr/> Contributor address; City; State; Zip Code HUDSON OAKS, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRICKE, TREY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROMAN, WENDY <hr/> Contributor address; City; State; Zip Code CAMERON, TX 76520	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, BENJIE <hr/> Contributor address; City; State; Zip Code LYONS, GA 30436-6010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/233 Rpt: 79/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, SYLVIA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTS RANCH <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$435.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURRY, LEE <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE FORCE QUARTER HORSES <hr/> Contributor address; City; State; Zip Code CONWAY, SC 29526	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE, ROBERT <hr/> Contributor address; City; State; Zip Code CONWAY, SC 29526-5910	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/233 Rpt: 80/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAHER, SAM <hr/> 6 Contributor address; City; State; Zip Code WELDA, KS 66091	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, ASHLEY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, BEAU <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, BECKY <hr/> Contributor address; City; State; Zip Code PURCELL, OK 73080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, GIL <hr/> Contributor address; City; State; Zip Code PURCELL, OK 73080	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/233 Rpt: 81/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, JODY <hr/> 6 Contributor address; City; State; Zip Code MARIETTA, OK 73448	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, WESLEY <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, WESLEY <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, WESLEY <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDY, LEE <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/233 Rpt: 82/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANN, JERRY <hr/> 6 Contributor address; City; State; Zip Code LEIGHTON, AL 35646	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDINER, EVA <hr/> Contributor address; City; State; Zip Code ASHLAND, KS 67831	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDINER, MARK <hr/> Contributor address; City; State; Zip Code ASHLAND, KS 67831	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, GRANT <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35244	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, GRANT <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35244	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/233 Rpt: 83/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARMENDIA, RAFAEL <hr/> 6 Contributor address; City; State; Zip Code DORAL, FL 33178	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, COLE <hr/> Contributor address; City; State; Zip Code LEVELLAND, TX 79336	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, KIM <hr/> Contributor address; City; State; Zip Code WESTCLIFFE, CO 81252	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, J D <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, J D <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/233 Rpt: 84/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATES, KELLY <hr/> 6 Contributor address; City; State; Zip Code MARTINEZ, GA 30907	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATES, TYLER SHAY <hr/> Contributor address; City; State; Zip Code MARFA, TX 79843	Amount of Contribution (\$) \$380.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, JOHN <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, JOHN <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	Amount of Contribution (\$) \$295.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, JOHN <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/233 Rpt: 85/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GCH LAND & CATTLE CO <hr/> 6 Contributor address; City; State; Zip Code WARREN, MI 48089	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GCH LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code WARREN, MI 48089	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENERATIONS PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WELLINGTON, CO 80549	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, DILLON <hr/> Contributor address; City; State; Zip Code BAXTER, TN 38544	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANY, KATHY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/233 Rpt: 86/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANNUKOS, JOHN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLES, MARK <hr/> Contributor address; City; State; Zip Code ALEX, OK 73002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETT, LESLEY <hr/> Contributor address; City; State; Zip Code LOCKWOOD, CA 93932	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLOCK, THERESA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/233 Rpt: 87/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN <hr/> 6 Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	7 Amount of Contribution (\$) \$95.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$390.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER/GALYEAN <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, LYNN <hr/> Contributor address; City; State; Zip Code MAX MEADOWS, VA 24360	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONCALVES, JOSE <hr/> Contributor address; City; State; Zip Code WAKE FOREST, NC 27587	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/233 Rpt: 88/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONCALVES, JOSE <hr/> 6 Contributor address; City; State; Zip Code WAKE FOREST, NC 27587	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONCALVES, JOSE <hr/> Contributor address; City; State; Zip Code WAKE FOREST, NC 27587	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONSALVES, JESSICA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOD, ALI <hr/> Contributor address; City; State; Zip Code ALVARADO, TX 76009	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOD, JIM <hr/> Contributor address; City; State; Zip Code ALVARADO, TX 76009-9618	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/233 Rpt: 89/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOD, T J <hr/> 6 Contributor address; City; State; Zip Code MARIETTA, OK 73448	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOD, T J <hr/> Contributor address; City; State; Zip Code MARIETTA, OK 73448	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODFRIED, KATHERINE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116-1909	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, SAMANTHA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89120	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, JOE <hr/> Contributor address; City; State; Zip Code CANTON, OH 44735	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/233 Rpt: 90/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAFF, REED <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75247	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, RUSSELL SCOTT <hr/> Contributor address; City; State; Zip Code MERKEL, TX 79536	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY G BAR RANCH <hr/> Contributor address; City; State; Zip Code SHIDLER, OK 74652	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEMAN, WALTER <hr/> Contributor address; City; State; Zip Code TISHOMINGO, OK 73460	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEMAN/HAYS <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/233 Rpt: 91/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREESON, MISTY <hr/> 6 Contributor address; City; State; Zip Code BARTLESVILLE, OK 74003	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREESON, MISTY <hr/> Contributor address; City; State; Zip Code BARTLESVILLE, OK 74003	Amount of Contribution (\$) \$410.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREESON, MISTY <hr/> Contributor address; City; State; Zip Code BARTLESVILLE, OK 74003	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY RANCHES <hr/> Contributor address; City; State; Zip Code FRUITA, CO 81521	Amount of Contribution (\$) \$455.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, MICHAEL <hr/> Contributor address; City; State; Zip Code ROCIADA, NM 87742	Amount of Contribution (\$) \$390.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/233 Rpt: 92/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ROCIADA, NM 87742	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVER, TRAVIS <hr/> Contributor address; City; State; Zip Code CRESCO, IA 52136	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GS CUTTING HORSES <hr/> Contributor address; City; State; Zip Code GRANDVIEW, TX 76050	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLY ENTERPRISES <hr/> Contributor address; City; State; Zip Code LAWN, TX 79530	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLY ENTERPRISES <hr/> Contributor address; City; State; Zip Code LAWN, TX 79530	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/233 Rpt: 93/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNDERSON, WAYNE <hr/> 6 Contributor address; City; State; Zip Code STEWARTVILLE, MN 55976	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADLOCK, PAIGE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGINS, DARREN <hr/> Contributor address; City; State; Zip Code BENTON CITY, WA 99320	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LEW <hr/> Contributor address; City; State; Zip Code HIGHLAND CITY, FL 33846	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALTOM, COREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/233 Rpt: 94/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALTOM, COREY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77043	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAM, ROBERT <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, HEATHER <hr/> Contributor address; City; State; Zip Code ROSWELL, NM 88201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSELMAN, SUSAN <hr/> Contributor address; City; State; Zip Code PIEDMONT, OK 73078	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, DAVID <hr/> Contributor address; City; State; Zip Code DULUTH, MN 55803	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/233 Rpt: 95/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, KEN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, KEN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDESTER, ROSS <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, BRAD <hr/> Contributor address; City; State; Zip Code TATUM, NM 88267	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, RONNIE <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40291	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/233 Rpt: 96/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, RONNIE <hr/> 6 Contributor address; City; State; Zip Code LOUISVILLE, KY 40291	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, TRENT <hr/> Contributor address; City; State; Zip Code BENTON, KY 42025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, TUCKER <hr/> Contributor address; City; State; Zip Code BENTON, KY 42025	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTON, BERVIN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75061	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTON, BERVIN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/233 Rpt: 97/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUERLAND, JOHN BRADLEY <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, TX 78934	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUERLAND, JOHN BRADLEY <hr/> Contributor address; City; State; Zip Code COLUMBUS, TX 78934	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, BOBBY RAY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, BOBBY RAY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-8839	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, MARY JO <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/233 Rpt: 98/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, MARY JO <hr/> 6 Contributor address; City; State; Zip Code SEGUIN, TX 78155	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWORTH, JIM <hr/> Contributor address; City; State; Zip Code SOUTHWEST CITY, MO 64863-0187	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWORTH, JIM <hr/> Contributor address; City; State; Zip Code SOUTHWEST CITY, MO 64863-0187	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYDEN, TROY <hr/> Contributor address; City; State; Zip Code RAPID CITY, SD 57702	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYDEN, TROY <hr/> Contributor address; City; State; Zip Code RAPID CITY, SD 57702	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/233 Rpt: 99/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, SHAWN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, SHAWN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, SHAWN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYWARD, SHAWN <hr/> Contributor address; City; State; Zip Code HERRIMAN, UT 84096	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HE REINS QUARTER HORSES <hr/> Contributor address; City; State; Zip Code MISOULA, MT 59808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/233 Rpt: 100/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HE REINS QUARTER HORSES <hr/> 6 Contributor address; City; State; Zip Code MISOULA, MT 59808	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARTS FROM HEAVEN <hr/> Contributor address; City; State; Zip Code HARTVILLE, OH 44632	Amount of Contribution (\$) \$280.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEDLUND, CODY <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEDLUND, LANDY <hr/> Contributor address; City; State; Zip Code WILTON, CA 95693-0163	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEID, BLAKE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/233 Rpt: 101/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIMBACH, ANN <hr/> 6 Contributor address; City; State; Zip Code DULUTH, MN 55804	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIMBACH, ANN <hr/> Contributor address; City; State; Zip Code DULUTH, MN 55804	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON-PERRY, SUSAN <hr/> Contributor address; City; State; Zip Code MULHALL, OK 73063	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRIX, GREGORY <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRICHS, JANNA <hr/> Contributor address; City; State; Zip Code BLACK HAWK, SD 57718	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/233 Rpt: 102/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$85.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, STEPHANIE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROLD, DEBORAH <hr/> Contributor address; City; State; Zip Code WEST POINT, IA 52656-9801	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROLD, THOMAS <hr/> Contributor address; City; State; Zip Code WEST POINT, IA 52656-9801	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGBEE, BRENDA <hr/> Contributor address; City; State; Zip Code REDMOND, OR 97756	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/233 Rpt: 103/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGGINBOTTOM, PAUL <hr/> 6 Contributor address; City; State; Zip Code ASH FLAT, AR 72513	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGH CARD RANCH <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DOTTIE ST CLAIR <hr/> Contributor address; City; State; Zip Code GLEN ROSE, TX 76043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMIE <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMIE <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/233 Rpt: 104/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIMSEL, BARBARA <hr/> 6 Contributor address; City; State; Zip Code DANVILLE, IN 46122	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIMSEL, BARBARA <hr/> Contributor address; City; State; Zip Code DANVILLE, IN 46122	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, REJ <hr/> Contributor address; City; State; Zip Code COTTONWOOD HEIGHTS, UT 84121	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, REJ <hr/> Contributor address; City; State; Zip Code COTTONWOOD HEIGHTS, UT 84121	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIRT, SHARI <hr/> Contributor address; City; State; Zip Code MAPLE CITY, MI 49664	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/233 Rpt: 105/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIRT, SHARI <hr/> 6 Contributor address; City; State; Zip Code MAPLE CITY, MI 49664	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIXON, THOMAS <hr/> Contributor address; City; State; Zip Code RIDGELAND, MS 39157-8615	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, CINDY <hr/> Contributor address; City; State; Zip Code ADEL, GA 31620-7689	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOELSCHER, MELISSA <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOELSCHER, MELISSA <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/233 Rpt: 106/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, GRANT	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code ANTHONY, FL 32617		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, GRANT	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code ANTHONY, FL 32617		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, DEAN	Amount of Contribution (\$) \$390.00
Contributor address; City; State; Zip Code MARIETTA, OK 73448		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, LINDA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code LONGMONT, CO 80503		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, LINDA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LONGMONT, CO 80503		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/233 Rpt: 107/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, TOM <hr/> 6 Contributor address; City; State; Zip Code NEW UNDERWOOD, SD 57761	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLTGRAVE, RICHARD <hr/> Contributor address; City; State; Zip Code CARLYLE, IL 62231	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME PLACE CATTLE COMPANY <hr/> Contributor address; City; State; Zip Code BLACKVILLE, SC 29817	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JAMES <hr/> Contributor address; City; State; Zip Code DECATUR, AL 35603	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JAMES <hr/> Contributor address; City; State; Zip Code DECATUR, AL 35603	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/233 Rpt: 108/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JAMES <hr/> 6 Contributor address; City; State; Zip Code DECATUR, AL 35603	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, KYLE <hr/> Contributor address; City; State; Zip Code ANDREWS, TX 79714	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, KYLE <hr/> Contributor address; City; State; Zip Code ANDREWS, TX 79714	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORSE COUNTRY ARENA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, RICK <hr/> Contributor address; City; State; Zip Code NEVADA, TX 75173	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/233 Rpt: 109/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, KALYN <hr/> 6 Contributor address; City; State; Zip Code APPLING, GA 30802	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSLANDER, ELIZABETH <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79706	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREY, CAREY <hr/> Contributor address; City; State; Zip Code EDMOND, OK 73025	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, WILLIAM <hr/> Contributor address; City; State; Zip Code WALLER, TX 77484	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTLEY, EJ <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/233 Rpt: 110/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURT, COURTNEY <hr/> 6 Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM WILLIAMS & YORK <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85258	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRBY, RICHARD <hr/> Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482	Amount of Contribution (\$) \$480.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRBY, RICHARD <hr/> Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON ROSE RANCH <hr/> Contributor address; City; State; Zip Code CARBONDALE, CO 81623	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/233 Rpt: 111/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRVIN, DOUG <hr/> 6 Contributor address; City; State; Zip Code HOLLIDAYSBURG, PA 16648	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRVIN, DOUG <hr/> Contributor address; City; State; Zip Code HOLLIDAYSBURG, PA 16648	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J B CATTLE <hr/> Contributor address; City; State; Zip Code HAMPTON, AR 71744	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J B CATTLE <hr/> Contributor address; City; State; Zip Code HAMPTON, AR 71744	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/233 Rpt: 112/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$775.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J+ RANCHES <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J+ RANCHES <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKPOT RANCH WEATHERFORD <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77487-2788	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/233 Rpt: 113/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKPOT RANCH WEATHERFORD <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77487-2788	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, CAITLIN <hr/> Contributor address; City; State; Zip Code CARMINE, TX 78932	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANSSEN PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code RUSH CITY, MN 55069	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARMA, JULIE <hr/> Contributor address; City; State; Zip Code ARDMORE, OK 73401-7964	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARNAGIN, KENT <hr/> Contributor address; City; State; Zip Code PROTECTION, KS 67127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/233 Rpt: 114/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFF JEFFERS ENT <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JETT, DOUGLAS <hr/> Contributor address; City; State; Zip Code SHAWNEE, OK 74804	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JETT, DOUGLAS <hr/> Contributor address; City; State; Zip Code SHAWNEE, OK 74804	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JINGOLI, JOSEPH <hr/> Contributor address; City; State; Zip Code LAMBERTVILLE, NJ 08530	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JINGOLI, JOSEPH <hr/> Contributor address; City; State; Zip Code LAMBERTVILLE, NJ 08530	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JK LOGAN <hr/> 6 Contributor address; City; State; Zip Code HARBOR SPGS, MI 49740	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN/ REBECCA/ JOSH HOFELDT <hr/> Contributor address; City; State; Zip Code GREEN RIVER, WY 82935	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, AUSTIN <hr/> Contributor address; City; State; Zip Code OVERBROOK, OK 73453	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BRETT <hr/> Contributor address; City; State; Zip Code HICO, TX 76457-0350	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KRISTA <hr/> Contributor address; City; State; Zip Code HURON, SD 57350	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LUCCHESI <hr/> 6 Contributor address; City; State; Zip Code WAYSIDE, TX 79094	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARK <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARY AGNES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSRUD RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, AMY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/233 Rpt: 117/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, AMY <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066-0648	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, STEVEN <hr/> Contributor address; City; State; Zip Code RUSH SPRINGS, OK 73082-2427	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code PARKER, SD 57053	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPLAN, GLENN <hr/> Contributor address; City; State; Zip Code SULPHUR, OK 73086	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/233 Rpt: 118/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARHAN, JAMES	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code BLANCO, TX 78606		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARHAN, JAMES	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code BLANCO, TX 78606		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASEROFF, SUSAN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMANN, TOM	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMANN, TOM	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/233 Rpt: 119/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUPKE, CLARK <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEARNEY, BOBBY <hr/> Contributor address; City; State; Zip Code STATESVILLE, NC 28677	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KECHNIE, BRIAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEN, BRIAN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEFFER, TERI <hr/> Contributor address; City; State; Zip Code MANHATTAN, MT 59741	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/233 Rpt: 120/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, JADE <hr/> 6 Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85262	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JACK <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMNA, MICHAEL <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272-7502	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETCHER, KEITH <hr/> Contributor address; City; State; Zip Code STARK CITY, MO 64866	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIDD, BILL <hr/> Contributor address; City; State; Zip Code LOLNTON, GA 30817	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/233 Rpt: 121/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, THOMAS <hr/> 6 Contributor address; City; State; Zip Code MORRIS, OK 74445	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLION, ROBYN <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KEVIN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLLER, DALE <hr/> Contributor address; City; State; Zip Code BETHLEHEM, PA 18015	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLLER, DALE <hr/> Contributor address; City; State; Zip Code BETHLEHEM, PA 18015	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/233 Rpt: 122/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLLER, DALE <hr/> 6 Contributor address; City; State; Zip Code BETHLEHEM, PA 18015	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLLER, DALE <hr/> Contributor address; City; State; Zip Code BETHLEHEM, PA 18015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUEGER, KELLY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUSE, LISA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUIPER, ROB <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/233 Rpt: 123/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUIPER, ROB <hr/> 6 Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULCZYCKI-BURTNER, KIMBERLY <hr/> Contributor address; City; State; Zip Code PONCA CITY, OK 74604	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKEY, DAVID <hr/> Contributor address; City; State; Zip Code BURLINGTON, NC 27215	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKEY, JADE <hr/> Contributor address; City; State; Zip Code BURLINGTON, NC 27215	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, BILL <hr/> Contributor address; City; State; Zip Code CRESTED BUTTE, CO 81224-1145	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/233 Rpt: 124/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, BILL <hr/> 6 Contributor address; City; State; Zip Code CRESTED BUTTE, CO 81224-1145	7 Amount of Contribution (\$) \$325.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKESIDE RANCH <hr/> Contributor address; City; State; Zip Code EDMOND, OK 73012	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKESIDE RANCH <hr/> Contributor address; City; State; Zip Code EDMOND, OK 73012	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, SHANNON <hr/> Contributor address; City; State; Zip Code CROWLEY, TX 76036	Amount of Contribution (\$) \$470.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, SHANNON <hr/> Contributor address; City; State; Zip Code CROWLEY, TX 76036	Amount of Contribution (\$) \$285.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/233 Rpt: 125/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGDON, TONY <hr/> 6 Contributor address; City; State; Zip Code AUBREY, TX 76227	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGDON, TONY <hr/> Contributor address; City; State; Zip Code AUBREY, TX 76227	Amount of Contribution (\$) \$380.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANIER, MAURICE <hr/> Contributor address; City; State; Zip Code SHREVEPORT, LA 71107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY HALL CUTTING HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSEN, COLBRAN BLUE <hr/> Contributor address; City; State; Zip Code GRUVER, TX 79040	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/233 Rpt: 126/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSEN, WILMA <hr/> 6 Contributor address; City; State; Zip Code GRUVER, TX 79040-6617	7 Amount of Contribution (\$) \$430.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSEN, WILMA <hr/> Contributor address; City; State; Zip Code GRUVER, TX 79040-6617	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTIMORE, MARY <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87504-2665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTIMORE, MARY <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87504-2665	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUB, ANDRE <hr/> Contributor address; City; State; Zip Code HOWE, TX 75459	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/233 Rpt: 127/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBY, RITA <hr/> 6 Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVELLE, JOHN P <hr/> Contributor address; City; State; Zip Code ATHENS, OH 45701	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVELLE, JOHN P <hr/> Contributor address; City; State; Zip Code ATHENS, OH 45701	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVENDER, MARK <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77834	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVENDER, MARK <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77834	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/233 Rpt: 128/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBLANC, MARCELLE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$115.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KELLYN <hr/> Contributor address; City; State; Zip Code TUSCALOOSA, AL 35401	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEETH, CHRISTY <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEETH, DUB <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031-9275	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHRMANN, CRYSTAL JAY ANN <hr/> Contributor address; City; State; Zip Code RISING STAR, TX 76471-2038	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/233 Rpt: 129/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHRMANN, CRYSTAL JAY ANN	7 Amount of Contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code RISING STAR, TX 76471-2038		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEROUX, KENNETH	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code PHOENIX, AZ 85050		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESSARD, KATHY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code ROCHESTER, MN 55906		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LETSIS, JOSH	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code CASTLE ROCK, CO 80104		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, DICK	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code ECHO, OR 97826-9604		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/233 Rpt: 130/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, DICK <hr/> 6 Contributor address; City; State; Zip Code ECHO, OR 97826-9604	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RICKY <hr/> Contributor address; City; State; Zip Code BATESVILLE, MS 38606	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, JOHN <hr/> Contributor address; City; State; Zip Code OLYMPIA, WA 98502-3328	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSEY, RAY <hr/> Contributor address; City; State; Zip Code LOLN NE, NE 68523	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, JANICE <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/233 Rpt: 131/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKER, DAVID <hr/> 6 Contributor address; City; State; Zip Code BROOKESMITH, TX 76827-4403	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, ANN <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67204	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, ANN <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGSDON, JACK <hr/> Contributor address; City; State; Zip Code SHAWNEETOWN, IL 62984	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONE OAK PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/233 Rpt: 132/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONE OAK PERFORMANCE HORSES <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89123	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG CALL RANCH <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, ALAN <hr/> Contributor address; City; State; Zip Code TALALA, OK 74080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, WAYLAND <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, WAYLAND <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/233 Rpt: 133/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, WAYLAND <hr/> 6 Contributor address; City; State; Zip Code POOLVILLE, TX 76487	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOS AMIGOS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76121	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOS JABONCILLOS RANCH <hr/> Contributor address; City; State; Zip Code PREMONT, TX 78375	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVELACE, TERRY <hr/> Contributor address; City; State; Zip Code RAYMOND, MS 39154-8935	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRANCE, DEVLYN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/233 Rpt: 134/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRANCE, DEVLYN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$115.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRANCE, DEVLYN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZA, FERNANDO <hr/> Contributor address; City; State; Zip Code HOMESTEAD, FL 33031	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZA, FERNANDO <hr/> Contributor address; City; State; Zip Code HOMESTEAD, FL 33031	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZA, FERNANDO <hr/> Contributor address; City; State; Zip Code HOMESTEAD, FL 33031	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/233 Rpt: 135/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS CATTLE COMPANY <hr/> 6 Contributor address; City; State; Zip Code CROSS TIMBERS, MO 65634	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS, JAIME LYNN <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, GERMAN <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, GERMAN <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, GERMAN <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/233 Rpt: 136/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, GERMAN <hr/> 6 Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MELISSA <hr/> Contributor address; City; State; Zip Code IOLA, TX 77861	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MELISSA <hr/> Contributor address; City; State; Zip Code IOLA, TX 77861	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOX, FAITH <hr/> Contributor address; City; State; Zip Code CHAMOIS, MO 65024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNESS, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNESS, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNESS, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN RIVER QUARTER HORSES <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN RIVER QUARTER HORSES <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAJESTIC MOUNTAIN VIEW RANCH <hr/> Contributor address; City; State; Zip Code GARDNERVILLE, NV 89410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/233 Rpt: 138/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCUSO, JANE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code PLANTERSVILLE, TX 77363		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCUSO, JOHN	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code PLANTERSVILLE, TX 77363		
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANION, HAVEY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PILOT POINT, TX 76258		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANION, KYLE	Amount of Contribution (\$) \$275.00
Contributor address; City; State; Zip Code AUBREY, TX 76227-0094		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCELLO, STEVEN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code THIBODAU, LA 70301		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/233 Rpt: 139/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGOT HAZELL <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGOT HAZELL <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN <hr/> Contributor address; City; State; Zip Code THERIOT, LA 70397	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN <hr/> Contributor address; City; State; Zip Code THERIOT, LA 70397	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, LARRY <hr/> Contributor address; City; State; Zip Code AVON, IL 61415	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/233 Rpt: 140/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GRANT <hr/> 6 Contributor address; City; State; Zip Code HENSLEY, AR 72065	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GRANT <hr/> Contributor address; City; State; Zip Code HENSLEY, AR 72065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MARY <hr/> Contributor address; City; State; Zip Code PAULS VALLEY, OK 73075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, NANCY <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$565.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, NANCY <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$530.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/233 Rpt: 141/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARVIN, KENLI <hr/> 6 Contributor address; City; State; Zip Code NEWKIRK, OK 74647	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARVIN, TOMMY <hr/> Contributor address; City; State; Zip Code BARNSDALL, OK 74002	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAST, JOSEPH <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462-8014	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, ROBERT <hr/> Contributor address; City; State; Zip Code GUTHRIE, TX 79236	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, ROBERT <hr/> Contributor address; City; State; Zip Code GUTHRIE, TX 79236	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/233 Rpt: 142/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHEWS, GREG <hr/> 6 Contributor address; City; State; Zip Code CLARKSVILLE, TN 37043	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, PEYTON <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATT GAINES CUTTING HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATT GAINES CUTTING HORSES LP <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS CUTTING HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$155.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, ANN <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, TX 78011	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CLINT <hr/> Contributor address; City; State; Zip Code COLLEGE GROVE, TN 37046	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAUPIN, TIMMAN <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, ANNETTE <hr/> Contributor address; City; State; Zip Code LAKE HAVASU CITY, AZ 86406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM <hr/> Contributor address; City; State; Zip Code SALTILLO, MS 38866	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM <hr/> 6 Contributor address; City; State; Zip Code SALTILLO, MS 38866	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM <hr/> Contributor address; City; State; Zip Code SALTILLO, MS 38866	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, DENNIS <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, SANDRA <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020-1229	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBURNEY, JULIE <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91502-1206	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBURNEY, JULIE <hr/> 6 Contributor address; City; State; Zip Code BURBANK, CA 91502-1206	7 Amount of Contribution (\$) \$280.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAIN, JIM <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAIN, JIM <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLAREN, JOHN <hr/> Contributor address; City; State; Zip Code MC GREGOR, TX 76657	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLAREN, JOHN <hr/> Contributor address; City; State; Zip Code MC GREGOR, TX 76657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURG, SCOTT <hr/> 6 Contributor address; City; State; Zip Code LIPAN, TX 76462	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JOHN <hr/> Contributor address; City; State; Zip Code BOWIE, TX 76230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$550.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/233 Rpt: 147/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCEWEN, ALAN <hr/> 6 Contributor address; City; State; Zip Code NORTH PORT, FL 34291-5689	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCEWEN, ALAN <hr/> Contributor address; City; State; Zip Code NORTH PORT, FL 34291-5689	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFANN, KYLEE <hr/> Contributor address; City; State; Zip Code ORLAND, CA 95965	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, BILLY BOB <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077-1776	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, BILLY BOB <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077-1776	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/233 Rpt: 148/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGLOTHLIN, BRETT <hr/> 6 Contributor address; City; State; Zip Code PERRIN, TX 76486	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGLOTHLIN, BRETT <hr/> Contributor address; City; State; Zip Code PERRIN, TX 76486	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, HELEN KINDLE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248-7901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, JOHN <hr/> Contributor address; City; State; Zip Code MARSHALL, MO 65340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINSEY, SCOTT <hr/> Contributor address; City; State; Zip Code CANAL WHESTER, OH 43110	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/233 Rpt: 149/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWHORTER, DEDEE <hr/> 6 Contributor address; City; State; Zip Code FORTUNA, CA 95540	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWHORTER, DEDEE <hr/> Contributor address; City; State; Zip Code FORTUNA, CA 95540	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEAGHER, NICK <hr/> Contributor address; City; State; Zip Code ANTONITA, CO 81120	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEAGHER, NICK <hr/> Contributor address; City; State; Zip Code ANTONITA, CO 81120	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEKS, JACOB <hr/> Contributor address; City; State; Zip Code SHELBYVILLE, KY 40065	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/233 Rpt: 150/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEFFORD, TAMYRA <hr/> 6 Contributor address; City; State; Zip Code EDMOND, OK 73034	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRITT, CYNDI <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRITT, DEE <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSENGER, JACO <hr/> Contributor address; City; State; Zip Code MUTUAL, OK 73853	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSENGER, JACO <hr/> Contributor address; City; State; Zip Code MUTUAL, OK 73853	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/233 Rpt: 151/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code RADNOR, OH 43066	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, WILLIAM <hr/> Contributor address; City; State; Zip Code CLERMONT, FL 34715	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, WILLIAM <hr/> Contributor address; City; State; Zip Code CLERMONT, FL 34715	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JONATHAN <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, AR 72740	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KIMBERLY <hr/> Contributor address; City; State; Zip Code DEXTER, NM 88230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/233 Rpt: 152/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARSHALL <hr/> 6 Contributor address; City; State; Zip Code GETTYSBURG, PA 17325	7 Amount of Contribution (\$) \$95.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MATT <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487-4235	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MEGAN <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, HOPE <hr/> Contributor address; City; State; Zip Code BURNEYVILLE, OK 73430	Amount of Contribution (\$) \$287.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL EQUINE HOLDINGS <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/233 Rpt: 153/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JOHN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOFFATT, JAYME <hr/> Contributor address; City; State; Zip Code RIPON, CA 95366	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALBANO, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, CASEY <hr/> Contributor address; City; State; Zip Code WILLISTON, FL 32696	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, GARY <hr/> Contributor address; City; State; Zip Code WILLISTON, FL 32696	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/233 Rpt: 154/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JACOB QUINN <hr/> 6 Contributor address; City; State; Zip Code MADILL, OK 73446	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KOLBY <hr/> Contributor address; City; State; Zip Code WILLISTON, FL 32696-5037	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, WILLIAM <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORINE, SARAH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LENN <hr/> Contributor address; City; State; Zip Code GUNTERSVILLE, AL 35976	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/233 Rpt: 155/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LENN <hr/> 6 Contributor address; City; State; Zip Code GUNTERSVILLE, AL 35976	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, SCOTT <hr/> Contributor address; City; State; Zip Code PROCTOR, TX 76468	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, SCOTT <hr/> Contributor address; City; State; Zip Code PROCTOR, TX 76468	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, DUSTY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, SUSAN <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/233 Rpt: 156/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTIMER, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSIER, LAUREL <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSIER, LAUREL <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, ROGER <hr/> Contributor address; City; State; Zip Code DECATUR, AL 35601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOURA STOCK DOGS <hr/> Contributor address; City; State; Zip Code PERRIN, TX 76486	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/233 Rpt: 157/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOURA STOCK DOGS <hr/> 6 Contributor address; City; State; Zip Code PERRIN, TX 76486	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINS, DEB <hr/> Contributor address; City; State; Zip Code LANCASTER, TX 75146	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, KAREN <hr/> Contributor address; City; State; Zip Code BUCYRUS, KS 66013	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, SHAUN <hr/> Contributor address; City; State; Zip Code CASPER, WY 82604	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUTIS, CRISTINA <hr/> Contributor address; City; State; Zip Code WESTON, FL 33331	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/233 Rpt: 158/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, JACLYN <hr/> 6 Contributor address; City; State; Zip Code RAYNE, LA 70567	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, JACLYN <hr/> Contributor address; City; State; Zip Code RAYNE, LA 70567	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, J T <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, RICHARD <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, TOMMY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/233 Rpt: 159/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETO, ARMANDO COSTA <hr/> 6 Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, ARTHUR <hr/> Contributor address; City; State; Zip Code MADISON, MS 39110-6838	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, ARTHUR <hr/> Contributor address; City; State; Zip Code MADISON, MS 39110-6838	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOEL, BENJAMIN <hr/> Contributor address; City; State; Zip Code WEST MONROE, LA 71291	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVACEK, JAY <hr/> Contributor address; City; State; Zip Code JOSHUA, TX 76058	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/233 Rpt: 160/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNELL, P J <hr/> 6 Contributor address; City; State; Zip Code ELIZABETHTOWN, KY 42702	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBERRAUCH, BRITTA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGDEN, JEFFRY <hr/> Contributor address; City; State; Zip Code KOUNTZE, TX 77625	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGDEN, JEFFRY <hr/> Contributor address; City; State; Zip Code KOUNTZE, TX 77625	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLD, JASON <hr/> Contributor address; City; State; Zip Code TULSA, OK 74103	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/233 Rpt: 161/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLMSTEAD ENTERPRISES CORP <hr/> 6 Contributor address; City; State; Zip Code HUTCHINSON, MN 55350	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSEN, KAREN <hr/> Contributor address; City; State; Zip Code BOYD, TX 76023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSEN, STEVE <hr/> Contributor address; City; State; Zip Code BOYD, TX 76023	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPHIR CREEK STABLES <hr/> Contributor address; City; State; Zip Code WASHOE VALLEY, NV 89704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPHIR CREEK STABLES <hr/> Contributor address; City; State; Zip Code WASHOE VALLEY, NV 89704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/233 Rpt: 162/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSWALD, ROBERT <hr/> 6 Contributor address; City; State; Zip Code POOLVILLE, TX 76487	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERSTREET, PAULA <hr/> Contributor address; City; State; Zip Code MILSAP, TX 76066	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, STEVE <hr/> Contributor address; City; State; Zip Code VERO BEACH, FL 32966	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, BILLY <hr/> Contributor address; City; State; Zip Code MILLICAN, TX 77866	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OXBOW RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/233 Rpt: 163/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OXBOW RANCH <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OXBOW RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, TERESA <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, TERESA <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED 4P RANCH <hr/> Contributor address; City; State; Zip Code WICKENBURG, AZ 85390	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/233 Rpt: 164/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED VALLEY RANCH ----- 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED VALLEY RANCH ----- Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED VALLEY RANCH ----- Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANNELL, VICK ----- Contributor address; City; State; Zip Code ALEXANDER, AR 72002-7007	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANNELL, VICK ----- Contributor address; City; State; Zip Code ALEXANDER, AR 72002-7007	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARA, ELIZABETH	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code OTHELLO, WA 99344		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, BILLY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HARTFORD, AL 36344		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, WILL	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code DOTHAN, AL 36303		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, WILL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DOTHAN, AL 36303		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, NORMAN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code LIHUE, HI 96766		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/233 Rpt: 166/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, LOUIS <hr/> 6 Contributor address; City; State; Zip Code TALLAHASSEE, FL 32309	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTILLO CUTTING HORSES <hr/> Contributor address; City; State; Zip Code ST ELMO, IL 62458	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTILLO CUTTING HORSES <hr/> Contributor address; City; State; Zip Code ST ELMO, IL 62458	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTON, SANDRA HALLIDAY <hr/> Contributor address; City; State; Zip Code WASHINGTON CH, OH 43160-0716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTON, SANDRA HALLIDAY <hr/> Contributor address; City; State; Zip Code WASHINGTON CH, OH 43160-0716	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/233 Rpt: 167/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAXTON, BILL <hr/> 6 Contributor address; City; State; Zip Code TALLULAH, LA 71284-0965	7 Amount of Contribution (\$) \$115.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, DONNELL <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, JAMES <hr/> Contributor address; City; State; Zip Code OVERBROOK, OK 73453	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, NADINE <hr/> Contributor address; City; State; Zip Code OVERBROOK, OK 73453	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, MARK <hr/> Contributor address; City; State; Zip Code SPEARMAN, TX 79081-0766	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/233 Rpt: 168/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERDUE, DANNY <hr/> 6 Contributor address; City; State; Zip Code RED OAK, TX 75154	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, CINDY <hr/> Contributor address; City; State; Zip Code WINNIE, TX 77665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKS, LACHLAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTITT, STACIE <hr/> Contributor address; City; State; Zip Code CLERMONT, GA 30527-1210	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, GARLAND <hr/> Contributor address; City; State; Zip Code REEDS SPRING, MO 65737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/233 Rpt: 169/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIKE, TIM <hr/> 6 Contributor address; City; State; Zip Code WEST COLUMBIA, TX 77486	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PILCHER, NICK <hr/> Contributor address; City; State; Zip Code LEXINGTON, IN 47138	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINE, MEGAN <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINHEIRO, JACOB <hr/> Contributor address; City; State; Zip Code TEMPELTON, CA 93455	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINHEIRO, JACOB <hr/> Contributor address; City; State; Zip Code TEMPELTON, CA 93455	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/233 Rpt: 170/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINKSTON, LICA <hr/> 6 Contributor address; City; State; Zip Code ALICE, TX 78333-1277	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PISCULLI, JAMIE <hr/> Contributor address; City; State; Zip Code GHENT, NY 12075-2904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITARD, TODDY <hr/> Contributor address; City; State; Zip Code EL DORADO, AR 71730	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITARD, TODDY <hr/> Contributor address; City; State; Zip Code EL DORADO, AR 71730	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTMAN, BILL JACK <hr/> Contributor address; City; State; Zip Code MORSE, TX 79062	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/233 Rpt: 171/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLANTATION FARMS <hr/> 6 Contributor address; City; State; Zip Code DENHAM SPRINGS, LA 70726	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLANTATION FARMS <hr/> Contributor address; City; State; Zip Code DENHAM SPRINGS, LA 70726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATT, KENNETH <hr/> Contributor address; City; State; Zip Code FORT LUPTON, CO 80621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATT, KENNETH <hr/> Contributor address; City; State; Zip Code FORT LUPTON, CO 80621	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLENDL, RICK <hr/> Contributor address; City; State; Zip Code KINGSLEY, IA 51028-8608	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLENDL, RICK <hr/> 6 Contributor address; City; State; Zip Code KINGSLEY, IA 51028-8608	7 Amount of Contribution (\$) \$330.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLENDL, RICK <hr/> Contributor address; City; State; Zip Code KINGSLEY, IA 51028-8608	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTS, KRIS <hr/> Contributor address; City; State; Zip Code SCOTTS HILL, TN 38374	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRELLWITZ, MARTY <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, DOUGLAS <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$430.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code QUINLAN, TX 75474	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYOR, MARK <hr/> Contributor address; City; State; Zip Code GAINESBORO, TN 38562	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYOR, MARK <hr/> Contributor address; City; State; Zip Code GAINESBORO, TN 38562	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMFORD, JEAN <hr/> Contributor address; City; State; Zip Code MARLOW, OK 73055	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY PERFORMANCE HORSES <hr/> 6 Contributor address; City; State; Zip Code BURLESON, TX 76028	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY, DIXIE <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADFORD QUARTER HORSES <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADFORD, KEVIN <hr/> Contributor address; City; State; Zip Code ALVA, OK 73717	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADOMSKE, JODY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/233 Rpt: 175/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFTER FOUR LAND AND CATTLE CO <hr/> 6 Contributor address; City; State; Zip Code HOLLAND, MI 49423	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFTER FOUR LAND AND CATTLE CO <hr/> Contributor address; City; State; Zip Code HOLLAND, MI 49423	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL <hr/> Contributor address; City; State; Zip Code HUNTERSVILLE, NC 28078	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL <hr/> Contributor address; City; State; Zip Code HUNTERSVILLE, NC 28078	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANGEL, CARLOS <hr/> Contributor address; City; State; Zip Code DAVIE, FL 33324	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/233 Rpt: 176/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, PHILIP <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$650.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, PHILIP <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$625.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCHEN, BILL <hr/> Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTA, BRANDY <hr/> Contributor address; City; State; Zip Code HOLMESVILLE, OH 44633	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTA, BRANDY <hr/> Contributor address; City; State; Zip Code HOLMESVILLE, OH 44633	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/233 Rpt: 177/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVA, JERRY <hr/> 6 Contributor address; City; State; Zip Code PASO ROBLES, CA 93447-2160	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVA, JERRY <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93447-2160	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWITSER, MIKE <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REATA CUTTING HORSES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECTOR, JENNIFER <hr/> Contributor address; City; State; Zip Code ROGERSVILLE, MO 65742	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/233 Rpt: 178/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECTOR, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code ROGERSVILLE, MO 65742	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDTOWN'S N5 LAND & LIVESTOCK <hr/> Contributor address; City; State; Zip Code POLLOK, TX 75969-2429	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED LEGACY PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED LEGACY PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REESE, GAREN <hr/> Contributor address; City; State; Zip Code GONZALES, TX 78629	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/233 Rpt: 179/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAN & REYLY PLENDL <hr/> 6 Contributor address; City; State; Zip Code KINGSLEY, IA 51028	7 Amount of Contribution (\$) \$230.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY <hr/> Contributor address; City; State; Zip Code FRANKTON, IN 46044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY <hr/> Contributor address; City; State; Zip Code FRANKTON, IN 46044	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY <hr/> Contributor address; City; State; Zip Code FRANKTON, IN 46044	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY <hr/> Contributor address; City; State; Zip Code FRANKTON, IN 46044	Amount of Contribution (\$) \$545.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/233 Rpt: 180/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMUDA CH <hr/> Contributor address; City; State; Zip Code KRUGERVILLE, TX 76227	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RETTERRATH, WILLIAM <hr/> Contributor address; City; State; Zip Code OLIVER CENTER, ND 58530	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RETTERRATH, WILLIAM <hr/> Contributor address; City; State; Zip Code OLIVER CENTER, ND 58530	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, DAVID <hr/> Contributor address; City; State; Zip Code NIWOT, CO 80503	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/233 Rpt: 181/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, GABE <hr/> 6 Contributor address; City; State; Zip Code VINE GROVE, KY 40175	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHOADES, JOSH <hr/> Contributor address; City; State; Zip Code BOWIE, TX 76230	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, KATIE <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDLE, MAKAYLA <hr/> Contributor address; City; State; Zip Code FOSTER, OK 73434	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDLE, WILLIAM <hr/> Contributor address; City; State; Zip Code PORT DEPOSIT, MD 21904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/233 Rpt: 182/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIO ROCA LAND & CATTLE CO <hr/> 6 Contributor address; City; State; Zip Code GRAFORD, TX 76449	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, AMY <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015-1104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, AMY <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015-1104	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KATE <hr/> Contributor address; City; State; Zip Code ORLANDO, OK 73073	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MATTHEW <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/233 Rpt: 183/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCK CREEK CUTTING HORSES <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JOHN <hr/> Contributor address; City; State; Zip Code LANCASTER, CA 93536	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$440.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/233 Rpt: 184/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKIN B CUTTING HORSES	7 Amount of Contribution (\$) \$80.00
6 Contributor address; City; State; Zip Code BRANDON, MS 39047		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH	Amount of Contribution (\$) \$1,200.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/233 Rpt: 185/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, REYNALDO <hr/> 6 Contributor address; City; State; Zip Code DORAL, FL 33178	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, REYNALDO <hr/> Contributor address; City; State; Zip Code DORAL, FL 33178	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, BRAD <hr/> Contributor address; City; State; Zip Code MADILL, OK 73446-9747	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JONATHAN <hr/> Contributor address; City; State; Zip Code ROCKDALE, TX 76567	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROIDOPOULOS, GINA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/233 Rpt: 186/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE VALLEY RANCH	7 Amount of Contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE VALLEY RANCH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEBERRY, STEPHEN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PERRIN, TX 76486		
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEWELL, RICKY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COOKVILLE, TX 75558-9702		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEWELL, RICKY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COOKVILLE, TX 75558-9702		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/233 Rpt: 187/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSON, COLETA <hr/> 6 Contributor address; City; State; Zip Code NOVICE, TX 79538	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHWELL, RICHARD <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606-4385	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROULSTON, BARRY <hr/> Contributor address; City; State; Zip Code CISCO, TX 76437-1533	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYAL, BENJAMIN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPX ENTERPRISES <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/233 Rpt: 188/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPX ENTERPRISES <hr/> 6 Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RSF INVESTMENTS <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUIZ, MARIAN <hr/> Contributor address; City; State; Zip Code DEVINE, TX 78016	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA <hr/> Contributor address; City; State; Zip Code MORGAN, UT 84050	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA <hr/> Contributor address; City; State; Zip Code MORGAN, UT 84050	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/233 Rpt: 189/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA <hr/> 6 Contributor address; City; State; Zip Code MORGAN, UT 84050	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA <hr/> Contributor address; City; State; Zip Code MORGAN, UT 84050	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANN <hr/> Contributor address; City; State; Zip Code SAN SIMEON, CA 93452	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN FLAT CATTLE COMPANY <hr/> Contributor address; City; State; Zip Code MARFA, TX 79843	Amount of Contribution (\$) \$310.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADLERS FARM <hr/> Contributor address; City; State; Zip Code LAKEVIEW, AR 72642	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/233 Rpt: 190/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADLERS FARM <hr/> 6 Contributor address; City; State; Zip Code LAKEVIEW, AR 72642	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALIBA, WILLIAM <hr/> Contributor address; City; State; Zip Code DENNIS, TX 76439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDFORD, JULIE <hr/> Contributor address; City; State; Zip Code ORANGE, CA 92869	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARCO CREEK RANCH <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77902-0409	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHRECK, MICHAEL <hr/> Contributor address; City; State; Zip Code DIKE, IA 50624	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/233 Rpt: 191/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code UTICA, KS 67584	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTZ, KEN <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95818	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULZ, JOEL <hr/> Contributor address; City; State; Zip Code PARKER, CO 80138	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRIBNER, KRISTY <hr/> Contributor address; City; State; Zip Code GOODRICH, MI 48438	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/233 Rpt: 192/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76126		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH	Amount of Contribution (\$) \$115.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76126		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAN & ASHLEY FLYNN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIZ, DENISE	Amount of Contribution (\$) \$215.00
Contributor address; City; State; Zip Code OCALA, FL 34480		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENN, MARK	Amount of Contribution (\$) \$220.00
Contributor address; City; State; Zip Code AUGUSTA, GA 30909		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/233 Rpt: 193/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENN, MARK <hr/> 6 Contributor address; City; State; Zip Code AUGUSTA, GA 30909	7 Amount of Contribution (\$) \$1,060.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENN, MARK <hr/> Contributor address; City; State; Zip Code AUGUSTA, GA 30909	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, BONNIE <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628-3949	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARRON OAKS RANCH <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, SCOTT <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, IL 62864	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/233 Rpt: 194/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/233 Rpt: 195/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, AUSTIN <hr/> 6 Contributor address; City; State; Zip Code SUMMERDALE, AL 36580-0429	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, AUSTIN <hr/> Contributor address; City; State; Zip Code SUMMERDALE, AL 36580-0429	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, AUSTIN <hr/> Contributor address; City; State; Zip Code SUMMERDALE, AL 36580-0429	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, SAMANTHA <hr/> Contributor address; City; State; Zip Code GRAPELAND, TX 75844-4383	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERBURN, LOYD <hr/> Contributor address; City; State; Zip Code OROVADA, NV 89425	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/233 Rpt: 196/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, ISIDRO	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO	Amount of Contribution (\$) \$170.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ADAM	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code KILLEN, AL 35645		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, MARK TIMOTHY	Amount of Contribution (\$) \$180.00
Contributor address; City; State; Zip Code DRY RIDGE, KY 41035		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/233 Rpt: 197/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINOR, WESLEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77027	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SITTON, KEN <hr/> Contributor address; City; State; Zip Code FREEPORT, TX 77542-2710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SITTON, KEN <hr/> Contributor address; City; State; Zip Code FREEPORT, TX 77542-2710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINKIS, SCOTT <hr/> Contributor address; City; State; Zip Code BRILLION, WI 54110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINKIS, SCOTT <hr/> Contributor address; City; State; Zip Code BRILLION, WI 54110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/233 Rpt: 198/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATE RIVER RANCH	7 Amount of Contribution (\$) \$900.00
6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATE RIVER RANCH	Amount of Contribution (\$) \$1,250.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATTEN, J D	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76179-4224		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATTEN, J D	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76179-4224		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAUGHTER, LEXINGTON BROOKE	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/233 Rpt: 199/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLY, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code COOPERSBURG, PA 18036	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMART, RUSTY <hr/> Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445-8888	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES <hr/> Contributor address; City; State; Zip Code ASPEN, CO 81612	Amount of Contribution (\$) \$565.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES <hr/> Contributor address; City; State; Zip Code ASPEN, CO 81612	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CINDY <hr/> Contributor address; City; State; Zip Code CAPITAN, NM 88316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/233 Rpt: 200/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JACK <hr/> 6 Contributor address; City; State; Zip Code OAKWOOD, TX 75855	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/233 Rpt: 201/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79702	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, RYAN <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, TONY <hr/> Contributor address; City; State; Zip Code YORK, SC 29745	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SODREL, NOAH <hr/> Contributor address; City; State; Zip Code LABELLE, FL 33935	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOKOL, JAMIE <hr/> Contributor address; City; State; Zip Code DELEON SPRINGS, FL 32130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/233 Rpt: 202/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHERN CATTLE COMPANY <hr/> 6 Contributor address; City; State; Zip Code MARIANNA, FL 32446	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHWORTH, ALISHA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHWORTH, ROBERT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHWORTH, ROBERT <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$155.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEER, KEVIN <hr/> Contributor address; City; State; Zip Code BILLINGS, MO 65610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/233 Rpt: 203/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEER, KEVIN <hr/> 6 Contributor address; City; State; Zip Code BILLINGS, MO 65610	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDISH, AMANDA <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70808	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$460.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/233 Rpt: 204/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$560.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/233 Rpt: 205/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENT, NORA <hr/> 6 Contributor address; City; State; Zip Code CARSON CITY, NV 89705	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENT, NORA <hr/> Contributor address; City; State; Zip Code GARDNERVILLE, NV 89460	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERNFELS, TIFFANY <hr/> Contributor address; City; State; Zip Code DENHAM SPRINGS, LA 70726	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, KRIS <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85259	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, TROY <hr/> Contributor address; City; State; Zip Code MAY, TX 76857	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/233 Rpt: 206/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, ANN <hr/> 6 Contributor address; City; State; Zip Code GRENADA, MS 38901	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KANDACE <hr/> Contributor address; City; State; Zip Code DUBLIN, TX 76446	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAIN, KATHLEEN <hr/> Contributor address; City; State; Zip Code WHITE RIVER, SD 57579	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAYHORN PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code EARLSBORO, OK 74840	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAYHORN PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code EARLSBORO, OK 74840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/233 Rpt: 207/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, LISA <hr/> 6 Contributor address; City; State; Zip Code CHRISTOVAL, TX 76935	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, LISA <hr/> Contributor address; City; State; Zip Code CHRISTOVAL, TX 76935	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUNK, AMY ADAMS <hr/> Contributor address; City; State; Zip Code WALLER, TX 77484	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNEE RANCH <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SURLES, JASON <hr/> Contributor address; City; State; Zip Code Bowman, GA 30624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/233 Rpt: 208/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAIN, CHRIS	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEEM, LEE	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code NASHVILLE, NC 27856		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET BLESSINGS RANCH	Amount of Contribution (\$) \$140.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET BLESSINGS RANCH	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T & K PERFORMANCE HORSES	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code MORRISTOWN, AZ 85342		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/233 Rpt: 209/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T & L FARMS <hr/> 6 Contributor address; City; State; Zip Code MARKS, MS 38646	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T BAR K CUTTING HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANNER, BRADY <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAPP, JARED <hr/> Contributor address; City; State; Zip Code HANSON, KY 42413	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUREL, DAVID <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/233 Rpt: 210/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUREL, DAVID <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUREL, DAVID <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BERNARD <hr/> Contributor address; City; State; Zip Code HOUSTON, MO 65483	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LISA <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258	Amount of Contribution (\$) \$440.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, PAT <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258	Amount of Contribution (\$) \$590.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/233 Rpt: 211/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TRACY <hr/> 6 Contributor address; City; State; Zip Code YUBA CITY, CA 95993-9713	7 Amount of Contribution (\$) \$190.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TD CATTLE <hr/> Contributor address; City; State; Zip Code RUSTON, LA 71270	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93454	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93454	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93454	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/233 Rpt: 212/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE <hr/> 6 Contributor address; City; State; Zip Code SANTA MARIA, CA 93454	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN/27 RANCH <hr/> Contributor address; City; State; Zip Code DENHAM SPRINGS, LA 70726	Amount of Contribution (\$) \$850.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN/27 RANCH <hr/> Contributor address; City; State; Zip Code DENHAM SPRINGS, LA 70726	Amount of Contribution (\$) \$1,200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETON RIDGE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETON RIDGE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/233 Rpt: 213/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETON RIDGE <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETON RIDGE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS HOLY COW PERF HORSES <hr/> Contributor address; City; State; Zip Code SANTA YNEZ, CA 93460	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAGGARD, GREG <hr/> Contributor address; City; State; Zip Code MERIDIAN, MS 39305	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE OVER FORTY RANCH <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/233 Rpt: 214/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE OVER FORTY RANCH <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIGPEN, ROBERT <hr/> Contributor address; City; State; Zip Code CHILTON, TX 76632-0518	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMASSON, JOHANN <hr/> Contributor address; City; State; Zip Code EDINBURG, ND 58227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CRAIG <hr/> Contributor address; City; State; Zip Code BUFFALO, TX 75831	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KENNY <hr/> Contributor address; City; State; Zip Code ANDREWS, TX 79714	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/233 Rpt: 215/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, MABEN <hr/> 6 Contributor address; City; State; Zip Code CROSSVILLE, TN 38571	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RICK <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77808	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ROBERTA <hr/> Contributor address; City; State; Zip Code COEUR D ALENE, ID 83815-3751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ROBERTA <hr/> Contributor address; City; State; Zip Code COEUR D ALENE, ID 83815-3751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/233 Rpt: 216/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TJUGUM, ANA <hr/> Contributor address; City; State; Zip Code LIPAN, TX 76462	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, JOE <hr/> Contributor address; City; State; Zip Code CALDWELL, TX 77836	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, JOE <hr/> Contributor address; City; State; Zip Code CALDWELL, TX 77836	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/233 Rpt: 217/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, KENNY <hr/> 6 Contributor address; City; State; Zip Code UNION, MS 39365	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNLEY, AARON <hr/> Contributor address; City; State; Zip Code JACKSBORO, TX 76458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAMMELL, GARY <hr/> Contributor address; City; State; Zip Code PERRIN, TX 76486	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRANBERG, MARIA <hr/> Contributor address; City; State; Zip Code REDLANDS, CA 92373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREGEMBA, ROBERT <hr/> Contributor address; City; State; Zip Code CASTLE ROCK, CO 80104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/233 Rpt: 218/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIANGLE T <hr/> 6 Contributor address; City; State; Zip Code BASIN, WY 82410	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPLE CREST FARM <hr/> Contributor address; City; State; Zip Code PADUCAH, KY 42001	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROTTER, GAYLE <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROYER, KELLY <hr/> Contributor address; City; State; Zip Code LEXINGTON, NE 68850	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, HAYDEN <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/233 Rpt: 219/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNBACK PONY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code OVERBROOK, OK 73453		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNBULL, THOMAS M	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MONTROSE, CO 81403		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-1402		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-1402		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-1402		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/233 Rpt: 220/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-1402	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-1402	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, NANCY <hr/> Contributor address; City; State; Zip Code BUSHNELL, FL 33513-0900	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, TED <hr/> Contributor address; City; State; Zip Code BUSHNELL, FL 33513-0900	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, VAUGHN <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/233 Rpt: 221/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWISTED L RANCH <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75402-9027	7 Amount of Contribution (\$) \$785.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TY COLE PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code NORTH FORK, ID 83466	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, LISA <hr/> Contributor address; City; State; Zip Code GUNTER, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNDERWOOD, BRANDON <hr/> Contributor address; City; State; Zip Code WYNNEWOOD, OK 73098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNROE, BRIAN <hr/> Contributor address; City; State; Zip Code GALLIPOLIS, OH 45631	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/233 Rpt: 222/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDER ARK, NIKKI <hr/> 6 Contributor address; City; State; Zip Code GAINESVILLE, TX 76241	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARNADORE, JOEY <hr/> Contributor address; City; State; Zip Code APPLING, GA 30802	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEASLEY, CARL <hr/> Contributor address; City; State; Zip Code WALLER, TX 77484	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERMANDEL, ROBERT <hr/> Contributor address; City; State; Zip Code BILLINGS, MT 59105	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIA OIL & RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/233 Rpt: 223/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIA OIL & RANCH <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA, CYNTHIA <hr/> Contributor address; City; State; Zip Code RENO, NV 89519	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VP CUTTING HORSES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024-6945	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VP CUTTING HORSES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024-6945	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, GENE <hr/> Contributor address; City; State; Zip Code ALVARADO, TX 76009	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/233 Rpt: 224/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, HOWARD <hr/> 6 Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, DAVE <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76240	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, LESLYN <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, RYLAN <hr/> Contributor address; City; State; Zip Code COLORADO CITY, TX 79512	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, CAROL ANDERSON <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/233 Rpt: 225/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, CAROL ANDERSON <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, PAUL <hr/> Contributor address; City; State; Zip Code WETUMKA, OK 74883-6127	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, PAUL <hr/> Contributor address; City; State; Zip Code WETUMKA, OK 74883-6127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, DEB <hr/> Contributor address; City; State; Zip Code MALCOLM, NE 68402	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS, CURTIS <hr/> Contributor address; City; State; Zip Code COTULLA, TX 78014	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/233 Rpt: 226/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS, CURTIS <hr/> 6 Contributor address; City; State; Zip Code COTULLA, TX 78014	7 Amount of Contribution (\$) \$700.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISBART CATTLE COMPANY <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS PERFORMANCE HORSES <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$520.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH-MCCULLOCH, SUSAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST COAST CUTTING HORSES <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95063	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/233 Rpt: 227/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS <hr/> 6 Contributor address; City; State; Zip Code GRANBURY, TX 76049	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANNIE <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, MS 39350	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, KRISTIN <hr/> Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE JOHNSON, LISA <hr/> Contributor address; City; State; Zip Code BENSON, NC 27504	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE JOHNSON, LISA <hr/> Contributor address; City; State; Zip Code BENSON, NC 27504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/233 Rpt: 228/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE JOHNSON, LISA <hr/> 6 Contributor address; City; State; Zip Code BENSON, NC 27504	7 Amount of Contribution (\$) \$95.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE OAK FARMS <hr/> Contributor address; City; State; Zip Code MELBA, ID 83641	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITIS, KELLEY <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY RANCH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY RANCH LP <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/233 Rpt: 229/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, KEVIN <hr/> 6 Contributor address; City; State; Zip Code ARTESIA, NM 88210	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLBORN, BARNEY <hr/> Contributor address; City; State; Zip Code STRATFORD, TX 79084	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LARRY <hr/> Contributor address; City; State; Zip Code GLADEWATER, TX 75647	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOM <hr/> Contributor address; City; State; Zip Code HALEYVILLE, AL 35565-0105	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOMMY <hr/> Contributor address; City; State; Zip Code ROSIE, AR 72571	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/233 Rpt: 230/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, GREGORY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$390.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, VIKI <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, VIKI <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, VIKI <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BRAD <hr/> Contributor address; City; State; Zip Code LONE GROVE, OK 73443	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/233 Rpt: 231/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BRAD <hr/> 6 Contributor address; City; State; Zip Code LONE GROVE, OK 73443	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, SHARON <hr/> Contributor address; City; State; Zip Code DEXTER, MO 63841-8386	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINARD, DEBRA <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85266	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINES, CONNOR <hr/> Contributor address; City; State; Zip Code PRAY, MT 59065	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WING, MIKE <hr/> Contributor address; City; State; Zip Code DALHART, TX 79022	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/233 Rpt: 232/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISEHART, ERIC <hr/> 6 Contributor address; City; State; Zip Code HEMET, CA 92544	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, LLOYD <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/233 Rpt: 233/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLGAMOTT, BRENDA <hr/> 6 Contributor address; City; State; Zip Code LOCKWOOD, CA 93932-0035	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, KOBIE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-1151	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MICHAEL <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487-5835	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PAULA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-1151	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PAULA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-1151	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/233 Rpt: 234/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, A D (PETE)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code BLANCHARD, OK 73010	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, BOBBY	Amount of Contribution (\$) \$255.00
	Contributor address; City; State; Zip Code BLANCHARD, OK 73010	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, BOBBY	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code BLANCHARD, OK 73010	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, BRAYDEN	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code DECATUR, TX 76234	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WR DIVERSIFIED HOLDINGS	Amount of Contribution (\$) \$235.00
	Contributor address; City; State; Zip Code DEPORT, TX 75435	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/233 Rpt: 235/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, PHIL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WUNDER, CATHERINE <hr/> Contributor address; City; State; Zip Code STILWELL, KS 66085	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WUNSCH, BRANDON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$515.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYMAN, LORI <hr/> Contributor address; City; State; Zip Code OSCEOLA, NE 68651	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XRC RANCH <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/233 Rpt: 236/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YELVERTON, JERRY <hr/> 6 Contributor address; City; State; Zip Code RUSSELLVILLE, AR 72812	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, KRISTEN <hr/> Contributor address; City; State; Zip Code SARATOGA, WY 82331	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, KRISTEN <hr/> Contributor address; City; State; Zip Code SARATOGA, WY 82331	Amount of Contribution (\$) \$820.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, THAD <hr/> Contributor address; City; State; Zip Code SARATOGA, WY 82331	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, THAD <hr/> Contributor address; City; State; Zip Code SARATOGA, WY 82331	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/233 Rpt: 237/252
2 FILER NAME NCHA's Texas Events PAC		3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, EDDIE <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76906-1087	7 Amount of Contribution (\$) \$230.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, EDDIE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76906-1087	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIPPER VALLEY RANCH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOLLMAN, SHAINA <hr/> Contributor address; City; State; Zip Code ALVARADO, TX 76009	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
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4 Date 11/09/2023	5 Payee name Ashby, Trent (Rep.)
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 412 Lufkin, TX 75902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Bonnen, Greg (Dr.)
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 174 Calder Rd STE 116 League City, TX 77573
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Buckley, Brad (Dr.)
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1321 Pershing Drive Killeen, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
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4 Date 11/09/2023	5 Payee name Burrows, Dustin
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10507 Quaker Ave Ste 103 Lubbock, TX 79424
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Cain, Briscoe
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 7 Deer Park, TX 77536
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Capriglione, Giovanni
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1205 South White Chapel Blvd Ste 100 Southlake, TX 76092
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Chen Button, Angie (Rep.)	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 832748 Richardson, TX 75083	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Creighton, Brandon	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2257 N. Loop 336, Suite 140-366 Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2023	Payee name DTH Strategies	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 08/15/2023	5 Payee name DTH Strategies	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2023	Payee name DTH Strategies	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2023	Payee name DTH Strategies	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/01/2023	5 Payee name DTH Strategies	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name DTH Strategies	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 W 14TH ST Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name Fallon, Pat	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 57875 Denton, TX 76206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
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4 Date 11/09/2023	5 Payee name Frederick Frazier Campaign
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4100 Eldorado Pkwy, Ste. 100 McKinney, TX 75070
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/19/2023	Payee name Frost Bank
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Amount (\$) \$20.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/16/2023	Payee name Frost Bank
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Amount (\$) \$20.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/19/2023	5 Payee name Frost Bank	
6 Amount (\$) \$20.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2023	Payee name Frost Bank	
Amount (\$) \$20.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2023	Payee name Frost Bank	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/16/2023	5 Payee name Frost Bank	
6 Amount (\$) \$20.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/18/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$20.50 <input type="checkbox"/> Expenditure from corporate funds	Office sought 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/09/2023	Candidate/Officeholder name Geren, Charlie (Rep.)	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1011 Roberts Cutoff River Oaks, TX 76114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Gonzalez, Mary	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 450 Clint, CA 79836	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Hancock, Kelly	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7101 Burns St Fort Worth, TX 76118	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Harris, Cody	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 Avenue A Palestine, TX 75801	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Hefner, Cole	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 167 Mount Pleasant , TX 75456	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name King, Phil	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2110 Fort Worth Hwy Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Kolkhorst, Lois	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. Box 1867 Brenham, TX 77834	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
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4 Date 11/09/2023	5 Payee name Kuempel, John
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 523 E Donegan #102 Seguin, TX 78155
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Lamantia, Morgan
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1324 E. Madison Brownsville, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Leach, Jeff
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 Glen Rose Drive Allen, TX 75013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Longoria, Oscar	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1029 Penitas, TX 78576	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2023	Payee name Macy Hill Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 471121 Fort Worth, TX 76147	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Metcalf, Will	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 454 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Morgan Meyer for Texas	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3838 Oak Lawn Avenue, Suite 400 Dallas, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Patterson, Jared	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5533 FM 423, Suite 503 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Perry, Charles	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 94806 Lubbock, TX 79493	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 11/09/2023	5 Payee name Rose, Toni	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 398020 Dallas, TX 75339	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Spiller, David	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 447 Jacksboro, TX 76458	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Thimesch, Kronda	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1301 Justin Road Lewisville, TX 75077	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/15 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
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4 Date 11/09/2023	5 Payee name Troxclair, Ellen
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 701 HWY 281, Suite H #196 Marble Falls, TX 78654
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Zaffirini, Judith
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1407 Washington Street Laredo, TX 78042
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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