CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| | Guide explains how to comple | ete this form. | 1 Filer ID (Ethics Commi 00087746 | | 2 Total pages file | | | | |
|--|-----------------------------------|------------------|---|-----------------------------------|---------------------------------------|-----------------------------------|--|--|--|
| 3 CANDIDATE / OFFICEHOLDER | MS / MRS / MR | FIRST | | MI | OFFICE U | ISE ONLY | | | |
| NAME | Ms. | Angel | | | Date Received ELECTRONICA | LLY FILED | | | |
| | NICKNAME | LAST Carroll | | SUFFIX | 02/26/2024 | | | | |
| 4 CANDIDATE / | ADDDECC / DO DOV. ADT | / OUTE # OT | | 710.0005 | Date Hand-delivered or | Data Doctmarked | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX; APT PO BOX 1504 | / SUITE #; CIT | Υ; | ZIP CODE | Receipt # | Amount | | | |
| Change of Address | Hutto, TX 78634 | | | | Date Processed | | | | |
| | | | | | Date Imaged | | | | |
| 5 CAMPAIGN | MS / MRS / MR | FIRST | | MI | | | | | |
| TREASURER NAME | | Brigid | | | | | | | |
| | NICKNAME | LAST | | SUFFIX | | | | | |
| | | Lester | | | | | | | |
| 6 CAMPAIGN | STREET ADDRESS (NO PO | BOX PLEASE); | AP ⁻ | r / SUITE #; CITY | ; STA | TE; ZIP CODE | | | |
| TREASURER ADDRESS | 2209 Falming Tree Court | | | | | | | | |
| (Residence or Business) | Cedar Park, TX 78613 | | | | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHON (512) 656-5752 | E NUMBER E | EXTENSION | | | | | | |
| 8 REPORT TYPE | January 15 | 30th day before | election | Runoff | 15th day after can appointment (offic | npaign treasurer eholder only) | | | |
| | July 15 | 8th day before 6 | election | Exceeded modified reporting limit | Final Report (Attac | ch C/OH-FR) | | | |
| 9 PERIOD COVERED | Month Day Year | TL | IROUGH | Month Day | Year | | | | |
| | 01/26/2024 | 117 | ikoogn | 02/24/202 | 24 | | | | |
| 10 ELECTION | ELECTION DATE | | | ELECTION TYPE | | | | | |
| | Month Day Year 03/05/2024 | XP | rimary | Runoff | Other | | | | |
| | 05/05/2024 | G | eneral | Special | | | | | |
| 11 OFFICE | OFFICE HELD (if any) | - | | 12 OFFICE SOUGH | Γ (if known) | | | | |
| | | | | State Represen | tative District 52 | | | | |
| | | | | | | | | | |
| | GO TO PAGE 2 | | | | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 44

| 13 C / OH NAME | 14 Filer ID (100087746 | Ethics Comn | nission Filers) | | | |
|--|-----------------------------------|------------------------|---|--------------------------|---------------|-----------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | These expenditures may | epted or political expenditu have been made without t ed to report this information | he candidate's or office | holder's knou | vledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | | | |
| _ | GENERAL | | | | | |
| | | COMMITTEE ADDRESS | o . | | | |
| | SPECIFIC | | | | | |
| | | COMMITTEE CAMPAIG | IN TREASURER NAME | | | |
| | | COMMITTEE CAMPAIG | N TREASURER ADDRES | SS | | |
| 16 CONTRIBUTION TOTALS | N PLEDGES, LOANS, CTRONICALLY) | \$ | 0.00 | | | |
| | 5) | \$ | 25,938.66 | | | |
| EXPENDITURE TOTALS | | \$ | 0.00 | | | |
| | | \$ | 4,217.93 | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | | AINTAINED AS OF THE LA | AST DAY OF THE | \$ | 21,720.73 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | | JTSTANDING LOANS AS | OF THE LAST DAY | \$ | 1,008.28 |
| 17 AFFIDAVIT | | true a | ar, or affirm, under penalty and correct and includes al r Title 15, Election Code. | | | |
| | | | Ms | s. Angel Carroll | | |
| | | | Signature of | Candidate or Officeholo | der | _ |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | | |
| | | | | , this the | | _ day |
| | , 20, to co | | | | | |
| Signature of offi | cer administering | Printed name of offi | cer administering | Title of officer | aamınısterin | g oatn |

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| | | | |)VE | R SHEET PG 3 3 of 44 |
|----|-----------------------|--|-----------------------------|-------|-----------------------|
| | LER NAM arroll, Ai | ME ngel (Ms.) | 19 Filer ID 00087746 | (Ethi | cs Commission Filers) |
| | | E SUBTOTALS SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 25,938.66 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | X | SCHEDULE E: LOANS | | \$ | 106.36 |
| 5. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | S | \$ | 4,217.93 |
| 6. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 8. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 9. | | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | |
| 10 | . 🔲 | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (| OF C/OH | \$ | |
| 11 | . 🗆 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 12 | . 🗆 | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ | |
| _ | | | | | |
| | | | | | |
| | | | | | |

| | MONET | TARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A | | | |
|---|---------------------------------|---|------------------------|----|---|--------|---|-----------|--|--|
| | The Instru | ction Guide explains how | to complete this fo | rr | n. | 1 | Total pages Schedule A1: Sch: 1/29 Rpt: 4/44 | | | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) | | |
| 4 | Date 02/12/2024 | 5 Full name of contributorANA LUISA, SALAS-POR6 Contributor address; City; St | | |) | 7 | Amount of Contribution (\$) | \$100.00 | | |
| | Daine in all a con- | Austin, TX 78756-2912 | , I | _ | Faralaca (Octobration | | | | | |
| 8 | Not Employe | pation / Job title (See Instructions ed | 5) | 9 | Employer (See Instructions Not Employed | 5) | | | | |
| | Date 01/30/2024 | Full name of contributor ARBUCKLE, SUSAN Contributor address; City; Si | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$100.00 | | |
| | Drincinal occu | Austin, TX 78734 pation / Job title (See Instructions | ·) | | Employer (See Instructions | -, | | | | |
| | Purchasing \$ | |) | | City of Austin | ·) | | | | |
| | Date 02/14/2024 | Full name of contributor Aja, Gair Contributor address; City; Si | | |) | | Amount of Contribution (\$) | \$25.00 | | |
| | | Austin, TX 78702 | | | | | | | | |
| | Principal occu Consultant | pation / Job title (See Instructions | s) | | Employer (See Instructions Self | 5) | | | | |
| | Date 02/10/2024 | Full name of contributor Alexandria, Anderson Contributor address; City; Si Austin, TX 78721 | out-of-state PAC (ID#: | |) | • | Amount of Contribution (\$) | \$200.00 | | |
| | Principal occu Self employe | pation / Job title (See Instructionsed | 5) | | Employer (See Instructions Alexandria Anderson | s) | | | | |
| | Date 02/15/2024 | Full name of contributor Andrew, Hairston Contributor address; City; Si Austin, TX 78702 | out-of-state PAC (ID#: | |) | • | Amount of Contribution (\$) | \$25.00 | | |
| | Principal occu Project Direc | pation / Job title (See Instructions ctor | s) | | Employer (See Instructions Texas Appleseed | 5) | | | | |
| | | | | | | | | | | |

| a Guide explains how to complete this formula in Guide explains how the Guide explains have a supplied the Guide explains have the Guide | 9 Employer (See Instructions TIADA | 7 | Total pages Schedule A1: Sch: 2/29 Rpt: 5/44 Filer ID (Ethics Commission 00087746 Amount of Contribution (\$) | \$100.00 |
|--|---|--|---|---|
| ull name of contributor out-of-state PAC (ID#:_ ndrews, Sheila ontributor address; City; State; Zip Code dedar Park, TX 78613 dedar Pa | TIADA | 7 | 00087746 Amount of Contribution (\$) | \$100.00 |
| ull name of contributor out-of-state PAC (ID#:_ ndrews, Sheila ontributor address; City; State; Zip Code dedar Park, TX 78613 dedar Pa | TIADA | | Amount of Contribution (\$) | |
| ull name of contributor out-of-state PAC (ID#:_shika, Ganguly ontributor address; City; State; Zip Code | TIADA | 55) | Amount of Contribution (\$) | |
| ull name of contributor out-of-state PAC (ID#:_shika, Ganguly ontributor address; City; State; Zip Code ustin, TX 78733 | TIADA | S) | Amount of Contribution (\$) | |
| shika, Ganguly ontributor address; City; State; Zip Code ustin, TX 78733 |) | | Amount of Contribution (\$) | |
| | | ı | | \$52.00 |
| 17 Job title (See Instructions) | Employer (Coo Instructions | <u></u> | | |
| | Employer (See Instructions AISD | 5) | | |
| ull name of contributor |) | | Amount of Contribution (\$) | \$500.00 |
| ound Rock, TX 78681 | | | | |
| / Job title (See Instructions) | Employer (See Instructions Six Square | 5) | | |
| ull name of contributor out-of-state PAC (ID#:_ette, John ontributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$52.00 |
| / Job title (See Instructions) | Employer (See Instructions Not Employed | 5) | | |
| ontributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$250.00 |
| / Job title (See Instructions) | | <u>I</u> S) | | |
| ul e e e e e e e e e e e e e e e e e e e | Il name of contributor | Employer (See Instructions Six Square If name of contributor out-of-state PAC (ID#: | Employer (See Instructions) Six Square If name of contributor | Employer (See Instructions) Six Square Amount of Contribution (\$) Amount of Contribution (\$) |

| | MONET | ARY POLITICAL CON | S | SCHEDULE A | | | |
|---|--|---|-----------------------|--|-----------------------------|---|------------|
| | The Instruc | ction Guide explains how to c | complete this forn | n. | 1 | Total pages Schedule A1: Sch: 3/29 Rpt: 6/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | on Filers) |
| 4 | Date 02/12/2024 | Brooke, Scheibe 6 Contributor address; City; State; Z | ut-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Principal occu Not Employe | Round Rock, TX 78681 pation / Job title (See Instructions) d | | Employer (See Instructions Not Employed |) | | |
| | Date 01/28/2024 | Full name of contributor o Bryant, Gigi Contributor address; City; State; Z | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed |) | | |
| | Date 02/10/2024 | Full name of contributor o Carl, Jones Contributor address; City; State; Z | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Spicewood, TX 78669 pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Not Employe | | | Not Employed | | | |
| | Date 01/29/2024 | Full name of contributor | |) | | Amount of Contribution (\$) | \$250.00 |
| | • | pation / Job title (See Instructions) ions Consultant | | Employer (See Instructions Self |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 02/10/2024 Clarissia, Jackson Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | | Amount of Contribution (\$) | \$1,000.00 | |
| | Principal occu Not Employe | pation / Job title (See Instructions) d | | Employer (See Instructions Not Employed |) | | |
| | | | | | | | |

| | MONET | NETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A | | | |
|----------|-----------------------------|---|-------------------------|--------------|--|----------------|---|------------|--|--|
| | The Instruc | ction Guide explains how | to complete this fo | rr | n. | 1 | Total pages Schedule A1: Sch: 4/29 Rpt: 7/44 | | | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | | 3 | Filer ID (Ethics Commission 00087746 | on Filers) | | |
| 4 | Date 01/29/2024 | 5 Full name of contributor Conyngham, Karen6 Contributor address; City; St | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$15.00 | | |
| 8 | Dringing occu | Austin, TX 78746 | | _ | Employer (See Instructions | <u></u> | | | | |
| <u> </u> | researcher | pation / Job title (See Instructions |) | 9 | Employer (See Instructions Self | ·) | | | | |
| | Date 02/23/2024 | Full name of contributor Cook, Terry Contributor address; City; Si | | |) | • | Amount of Contribution (\$) | \$1,000.00 | | |
| | Principal occu | Round Rock, TX 78681 pation / Job title (See Instructions | s) | | Employer (See Instructions | <u> </u> s) | | | | |
| | Not Employ | Not Employed | | | Not Employed | | | | | |
| | Date 02/13/2024 | Full name of contributor David, Albert Contributor address; City; Si | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$300.00 | | |
| | | Austin, TX 78741 | | | | | | | | |
| | | pation / Job title (See Instructions nunity College | s) | | Employer (See Instructions Professor | 5) | | | | |
| | Date 02/22/2024 | Full name of contributor David, Overton Contributor address; City; St Austin, TX 78723 | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$100.00 | | |
| | Principal occu Partner | pation / Job title (See Instructions | 5) | | Employer (See Instructions Opus Faveo Innovation | | velopment | | | |
| | Date 02/23/2024 | Full name of contributor David, Overton Contributor address; City; Si Austin, TX 78723 | out-of-state PAC (ID#:_ | |) | • | Amount of Contribution (\$) | \$105.00 | | |
| | Principal occu Partner | pation / Job title (See Instructions | (3) | | Employer (See Instructions Opus Faveo Innovation | | velopment | | | |
| | | | | | | | | | | |

| | MONET | ARY POLITICAL CO | S | | SCHEDUL | E A1 | |
|---|--------------------------------|--|---------------------------------------|--|----------|---|-----------|
| | The Instru | ction Guide explains how t | o complete this form | n. | 1 | Total pages Schedule A1: Sch: 5/29 Rpt: 8/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/29/2024 | 5 Full name of contributor Davis, Wendy6 Contributor address; City; State | out-of-state PAC (ID#: e; Zip Code | | 7 | Amount of Contribution (\$) | \$500.00 |
| _ | Dein sin al acces | Austin, TX 78703 | T _a | Facelous (Control to the control to the | _ | | |
| 8 | Founder/Pub | pation / Job title (See Instructions) blic Speaker | 9 | Employer (See Instructions Deeds Not Words | 5) | | |
| | Date 02/23/2024 | Full name of contributor Denise, Gordon Contributor address; City; State | | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Round Rock, TX 78681 pation / Job title (See Instructions) | | Employer (See Instructions | <u>.</u> | | |
| | Not Employe | | | Not Employed | , | | |
| | Date 01/30/2024 | Full name of contributor Duncan, Jazirae Contributor address; City; State | out-of-state PAC (ID#:e; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | | Houston, TX 77092 | | | | | |
| | Principal occu Teacher | pation / Job title (See Instructions) | | Employer (See Instructions Spring Branch ISD | <u>(</u> | | |
| | Date 02/05/2024 | Full name of contributor Elizabeth, Burr Contributor address; City; State Austin, TX 78731 | out-of-state PAC (ID#:e; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed |) | | |
| | Date 02/12/2024 | Full name of contributor Felix, Chavez Contributor address; City; State Round Rock, TX 78664 | out-of-state PAC (ID#:e; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Insurance aç | pation / Job title (See Instructions) | | Employer (See Instructions Chavez Insurance Grou | | | |
| | | - | | | - | | |

| | MONET | NETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A | | | |
|---|--------------------------------|--|---|-----|--|----------|---|-----------|--|--|
| | The Instruc | ction Guide explains how | to complete this for | rm | | 1 | Total pages Schedule A1: Sch: 6/29 Rpt: 9/44 | | | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) | | |
| 4 | Date 02/24/2024 | 5 Full name of contributor Fred, Barhydt6 Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | |) | 7 | Amount of Contribution (\$) | \$52.00 | | |
| 8 | Principal occur | Georgetown, TX 78628 pation / Job title (See Instructions |) [9 |) F | Employer (See Instructions |) | | | | |
| Ŭ | marketing | pation 7 dob title (See Instructions | , | | Dell | ') | | | | |
| | Date 01/29/2024 | Full name of contributor Frost, Lucy Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | |) | | Amount of Contribution (\$) | \$100.00 | | |
| | | Manchaca, TX 78652 | | | | | | | | |
| | Principal occu Consultant | pation / Job title (See Instructions |) | | Employer (See Instructions Self | 5) | | | | |
| | Date 01/29/2024 | Full name of contributor Fuentes, Vanessa Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | | | | Amount of Contribution (\$) | \$100.00 | | |
| | | Austin, TX 78744 | | | | | | | | |
| | Principal occu District Rep | pation / Job title (See Instructions |) | | Employer (See Instructions city of austin | i) | | | | |
| | Date 02/01/2024 | Full name of contributor Garcia, MD, Catalina E Contributor address; City; St Dallas, TX 75231 | out-of-state PAC (ID#:ate; Zip Code | | | | Amount of Contribution (\$) | \$52.00 | | |
| | Principal occu Not Employe | pation / Job title (See Instructions |) | | Employer (See Instructions Not Employed | <u> </u> | | | | |
| | Date 02/07/2024 | Full name of contributor Genevieve, Davis Contributor address; City; St Cedar Park, TX 78613 | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$52.00 | | |
| | Principal occu Not Employe | pation / Job title (See Instructions |) | | Employer (See Instructions Not Employed | i) | | | | |
| | | | • | | | | | | | |

| | MONET | ARY POLITICAL CON | S | | SCHEDUL | SCHEDULE A1 | |
|---|---------------------------------|--|------------------------|---|-----------------------------|--|-----------|
| | The Instruc | ction Guide explains how to c | complete this form | n. | 1 | Total pages Schedule A1: Sch: 7/29 Rpt: 10/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/27/2024 | 5 Full name of contributor o Golab, James6 Contributor address; City; State; Z | |) | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | Deignaignal | Austin, TX 78746 | lo. | Francisco (Con Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions None | 5) | | |
| | Date 01/28/2024 | O1/28/2024 Goss, Jan Contributor address; City; State; Zip Code The Hills, TX 78738 | | | Amount of Contribution (\$) | \$250.00 | |
| | Principal occu | The Hills, TX 78738 pation / Job title (See Instructions) | | Employer (See Instructions | :) | | |
| | Consultant | , | | Jan Goss | , | | |
| | Date 01/30/2024 | Full name of contributor | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$5.00 |
| | | Irving, TX 75063 | | | | | |
| | Principal occu Manager | pation / Job title (See Instructions) | | Employer (See Instructions The North Face | () | | |
| | Date 02/12/2024 | Full name of contributor of contributor of contributor address; City; State; Z | ut-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Researcher | pation / Job title (See Instructions) | | Employer (See Instructions UC Berkeley | <u> </u> | | |
| | Date 01/31/2024 | Full name of contributor o Hairston, Andrew Contributor address; City; State; Z | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Project Direc | pation / Job title (See Instructions) ctor | | Employer (See Instructions Texas Appleseed |) | | |
| | | | · | | | | |

| | MONEI | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 | | | |
|---|---------------------------------|---|---|--|--|--|--|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 8/29 Rpt: 11/44 | | | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00087746 | | | |
| 4 | Date 02/02/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Hanes, Jenna 6 Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$25.00 | | | |
| 8 | Principal occu Not Employe | | Employer (See Instructions Not Employed | <u> </u> s) | | | |
| | Date 02/21/2024 Principal occur | Full name of contributor out-of-state PAC (ID#:_ Hannah, Horick Contributor address; City; State; Zip Code Georgetown, TX 78626 pation / Job title (See Instructions) | Employer (See Instructions | Amount of Contribution (\$) \$52.00 | | | |
| | | communications and Partnerships | Crisis Center of West To | | | | |
| | Date 01/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Hayes McMahon, Shellie Contributor address; City; State; Zip Code Cedar Park, TX 78613 | | Amount of Contribution (\$) \$500.00 | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | I s) | | | |
| | Date 02/24/2024 | Full name of contributor out-of-state PAC (ID#:_ Heather, Jefts Contributor address; City; State; Zip Code Cedar Park, TX 78613 |) | Amount of Contribution (\$) \$1,457.00 | | | |
| | Principal occu Not Employe | pation / Job title (See Instructions) | Employer (See Instructions Not Employed | 5) | | | |
| | Date 01/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Hinkle, Kali Contributor address; City; State; Zip Code Cedar Park, TX 78613 | | Amount of Contribution (\$) \$52.00 | | | |
| | Principal occu Not employe | pation / Job title (See Instructions) | Employer (See Instructions Self | 5) | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | IS | SCHEDULE A1 | | | |
|---|-------------------------------|---|-----|--|-----------------------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this | for | m. | 1 | Total pages Schedule A1: Sch: 9/29 Rpt: 12/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/02/2024 | Full name of contributor out-of-state PAC (ID#: lannaccone, Marisa Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$6.00 |
| | | Los Angeles, CA 90019 | _ | | | | |
| 8 | Principal occu Teacher | pation / Job title (See Instructions) | 9 | Employer (See Instructions Lake Travis ISD | 5) | | |
| | Date 02/07/2024 | Full name of contributor out-of-state PAC (ID#: Jacqueline, Freeman Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Pflugerville, TX 78660 pation / Job title (See Instructions) | _ | Employer (See Instructions | ;) | | |
| | • | ger/Chiropractic Assistant | | Back 2 Life Chiropractic | | | |
| | Date 01/29/2024 | Full name of contributor out-of-state PAC (ID#:) James, Joyce Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 | |
| | | Round Rock, TX 78665 | | | | | |
| | Principal occu Not Employe | pation / Job title (See Instructions) ed | | Employer (See Instructions Not Employed | 5) | | |
| | Date 02/16/2024 | Full name of contributor out-of-state PAC (ID#: Jay, Kennedy Contributor address; City; State; Zip Code Austin, TX 78703 | |) | • | Amount of Contribution (\$) | \$300.00 |
| | Principal occu Engineer | pation / Job title (See Instructions) | | Employer (See Instructions Wsb | 5) | | |
| | Date 02/20/2024 | Full name of contributor out-of-state PAC (ID#: Jeffrey, Clemmons Contributor address; City; State; Zip Code Austin, TX 78723 | | | | Amount of Contribution (\$) | \$300.00 |
| | Principal occu N/A | pation / Job title (See Instructions) | | Employer (See Instructions N/A | 5) | | |
| | | | • | | | | |

| | MONEI | ARY POLITICAL C | CONTRIBUTIO | ons | | SCHEDUL | E A1 |
|---|----------------------------------|--|--|---|--------|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 10/29 Rpt: 13/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/16/2024 | 5 Full name of contributor Jennifer, Markley6 Contributor address; City; St | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$15.00 |
| _ | Dringing Lagge | Round Rock, TX 78664 | , I | C. Franks var (Can knot vation | | | |
| 8 | Health Care | pation / Job title (See Instructions |) | Employer (See Instructions TMF | S) | | |
| | Date 02/08/2024 | Full name of contributor Jennifer, Toon Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code | | | Amount of Contribution (\$) | \$52.00 |
| | Principal occu | Austin, TX 78711 pation / Job title (See Instructions |) | Employer (See Instructions | s) | | |
| | Date 02/23/2024 | Full name of contributor Jennifer, Toon Contributor address; City; St | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$250.00 |
| | Dringing Lagge | Austin, TX 78753 | \ T | Faralousy (Cook Instructions | | | |
| | Policy | pation / Job title (See Instructions |) | Employer (See Instructions CTD | s) | | |
| | Date 02/12/2024 | Full name of contributor Jimmy, Flannigan Contributor address; City; St Austin, TX 78729 | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Administration | pation / Job title (See Instructions |) | Employer (See Instructions Austin Convention Ente | | ises, Inc. | |
| | Date 01/31/2024 | Full name of contributor John, Bette Contributor address; City; St Round Rock, TX 78665 | out-of-state PAC (ID#:_ ate; Zip Code | | | Amount of Contribution (\$) | \$104.00 |
| | Principal occu Not Employe | pation / Job title (See Instructionsed |) | Employer (See Instructions Not Employed | s) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL C | CONTRIBUTION | IS | | SCHEDUL | E A1 |
|---|-------------------------------|--|-------------------------------------|---|---|---|-------------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 11/29 Rpt: 14/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commissio 00087746 | n Filers) |
| 4 | Date 02/15/2024 | 6 Contributor address; City; St | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$5.00 |
| 8 | Principal occu Not Employe | Elgin, TX 78621 pation / Job title (See Instructionsed |) 9 | Employer (See Instructions Not Employed | <u> </u> s) | | |
| | Date 02/23/2024 | Full name of contributor Jude, Narcisse Contributor address; City; St. Pearland, TX 77584-2529 | ate; Zip Code | | | Amount of Contribution (\$) | \$16.66 |
| | Principal occu Not Employe | I pation / Job title (See Instructions | | Employer (See Instructions Not Employed | <u> </u> | | |
| | Date 02/06/2024 | Full name of contributor Julianne, Hanckel Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | | • | Amount of Contribution (\$) | \$250.00 |
| | Principal occur | Austin, TX 78747 pation / Job title (See Instructions |) T | Employer (See Instructions | <u>s)</u> | | |
| | PR/Commun | | , | Adisa Communications | -, | | |
| | Date 02/12/2024 | Full name of contributor Karen, Conyngham Contributor address; City; Sta | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occu researcher | pation / Job title (See Instructions |) | Employer (See Instructions | <u>l</u> S) | | |
| | Date 02/20/2024 | Full name of contributor Karin, Crump Contributor address; City; St | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Judge | pation / Job title (See Instructions | | Employer (See Instructions State of Texas | 5) | | |
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| | MONET | ARY POLITICAL COI | NTRIBUTION | S | | SCHEDUL | E A1 |
|---|---------------------------------|--|------------------------|---|----------------|---|-------------|
| | The Instruc | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 12/29 Rpt: 15/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/16/2024 | Kathryn, Schaffer | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$104.00 |
| _ | | Cedar Park, TX 78613 | | | <u></u> | | |
| 8 | Principal occu Public Relati | pation / Job title (See Instructions) ons | 9 | Employer (See Instructions Taylor Collective Solution | | | |
| | Date 02/15/2024 | Katie, Gleason Contributor address; City; State; 2 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | Round Rock, TX 78665 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | | |
| | Operations N | | | Doug Diffie | , | | |
| | Date 02/06/2024 | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$500.00 |
| | | Austin, TX 78732 | | | | | |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Keiko Anderson | s) | | |
| | Date 02/11/2024 | Kelly, White | | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu CEO | pation / Job title (See Instructions) | | Employer (See Instructions LIFT Alliance | 5) | | |
| | Date 02/13/2024 | Full name of contributor C Ken, Grays Contributor address; City; State; Z Houston, TX 77066 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Facility Asse | pation / Job title (See Instructions) SSOr | | Employer (See Instructions The Binary Group | 5) | | |
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| | MONET | ARY POLITICAL CONTRIB | BUTION | IS | | SCHEDULI | E A1 |
|---|---------------------------------|--|------------|--|----------------|---|-------------|
| | The Instru | ction Guide explains how to complet | e this for | m. | 1 | Total pages Schedule A1: Sch: 13/29 Rpt: 16/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/23/2024 | Full name of contributor out-of-state F Kevin, Harris Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$52.00 |
| | | Cedar Park, TX 78613 | | | | | |
| 8 | Principal occu Insurance | pation / Job title (See Instructions) | 9 | Employer (See Instructions Kevin Harris | 5) | | |
| | Date 01/30/2024 | Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu Retired | Glen Flora, TX 77443 pation / Job title (See Instructions) | | Employer (See Instructions None | <u> </u> S) | | |
| | Date 02/04/2024 | Full name of contributor out-of-state F Kline, Kristin Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$52.00 |
| | | Dallas, TX 75204 | | | | | |
| | Principal occu Not Employe | pation / Job title (See Instructions) ed | | Employer (See Instructions Not Employed | s) | | |
| | Date 01/29/2024 | Full name of contributor out-of-state F Korgel, Skyler Contributor address; City; State; Zip Code Austin, TX 78723 | |) | | Amount of Contribution (\$) | \$7.00 |
| | Principal occu Legislative D | pation / Job title (See Instructions) | | Employer (See Instructions Texas House of Repres | • | tatives | |
| | Date 01/27/2024 | Full name of contributor out-of-state F LABORDE, LACY Contributor address; City; State; Zip Code Austin, TX 78759 | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Communicat | pation / Job title (See Instructions) ions | | Employer (See Instructions Dell technologies | 5) | | |
| | | | | <u>-</u> | | | |

| | MONET | ARY POLITICAL CO | ONTRIBUTION | S | | SCHEDUL | E A1 |
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| | The Instruc | ction Guide explains how to | complete this forr | n. | 1 | Total pages Schedule A1: Sch: 14/29 Rpt: 17/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/30/2024 | 5 Full name of contributor Land, Diane6 Contributor address; City; State | | | 7 | Amount of Contribution (\$) | \$250.00 |
| 8 | Dringinal occu | Austin, TX 78701 pation / Job title (See Instructions) | ام | Employer (See Instructions | ·/ | | |
| • | Consultant | pation / Job title (See Instructions) | 9 | Self | ·) | | |
| | Date 02/10/2024 | Full name of contributor Larry, Boatright Contributor address; City; State | |) | | Amount of Contribution (\$) | \$10.00 |
| | | Spicewood, TX 78669 | | | Ĺ | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | 5) | | |
| | Date 02/03/2024 | Full name of contributor Leahy, Francesca Contributor address; City; State | out-of-state PAC (ID#:; |) | | Amount of Contribution (\$) | \$100.00 |
| | | Austin, TX 78704 | | | | | |
| | Principal occu Consultant | pation / Job title (See Instructions) | | Employer (See Instructions Self-employed | 5) | | |
| | Date 01/26/2024 | Full name of contributor Lee, Kirsten Contributor address; City; State Kittery, ME 03904 | out-of-state PAC (ID#: ; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu LMFT | pation / Job title (See Instructions) | | Employer (See Instructions self | 5) | | |
| | Date 02/09/2024 | Full name of contributor Leslie, Dawson Contributor address; City; State Austin, TX 78735 | out-of-state PAC (ID#: ; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Self | pation / Job title (See Instructions) | | Employer (See Instructions Consultant | s) | | |
| | | | • | | | | |

| | MONEI | ARY POLITICAL C | CONTRIBUTIO | NS | | SCHEDUI | E A1 |
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| | The Instru | ction Guide explains how | to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 15/29 Rpt: 18/44 | |
| 2 | FILER NAME Carroll, Ange | al (Mc) | | | 3 | Filer ID (Ethics Commission 00087746 | on Filers) |
| 4 | Date 02/02/2024 | Full name of contributor MacDougal, Vanessa Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | | 7 | Amount of Contribution (\$) | \$52.00 |
| 8 | Principal occu | Austin, TX 78757 pation / Job title (See Instructions | <u> </u> | 9 Employer (See Instructions | (3) | | |
| ľ | software eng | | , | Rapid7 | >) | | |
| | Date 02/12/2024 | Full name of contributor Madison, Kaigh Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| L | Dringing Loggy | El Paso, TX 79936 | \ | Employer (See Instructions | <u>''</u> | | |
| | | pation / Job title (See Instructions tions Manager |) | Employer (See Instructions Texas Center for Justice | | nd Equity | |
| | Date 02/22/2024 | Full name of contributor Maria, Martin Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | | • | Amount of Contribution (\$) | \$500.00 |
| | | Cedar Park, TX 78613 | | | | | |
| | Principal occu Not employe | pation / Job title (See Instructions ed |) | Employer (See Instructions Not employed | s) | | |
| | Date 02/23/2024 | Full name of contributor Marion, Look-Jameson Contributor address; City; St Austin, TX 78746 | out-of-state PAC (ID#: ate; Zip Code | | | Amount of Contribution (\$) | \$1,500.00 |
| | Principal occu Not Employe | pation / Job title (See Instructionsed |) | Employer (See Instructions Not Employed | 5) | | |
| | Date 02/21/2024 | Full name of contributor Mark, Abend Contributor address; City; St Aventura, FL 33180 | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$8.00 |
| | Principal occu | I pation / Job title (See Instructions |) | Employer (See Instructions NA | 5) | | |
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| | MONET | ARY POLITICAL CO | ONTRIBUTION | S | | SCHEDUL | E A1 |
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| | The Instruc | ction Guide explains how to | complete this forr | n. | 1 | Total pages Schedule A1: Sch: 16/29 Rpt: 19/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/16/2024 | 5 Full name of contributor Mary, Naranjo6 Contributor address; City; State | out-of-state PAC (ID#:; Zip Code |) | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | Dringing Lagra | Austin, TX 78731 | I o | Frankrian (Cookarationa | _ | | |
| 8 | CEO | pation / Job title (See Instructions) | 9 | Employer (See Instructions A Pineywoods home head | | ı care, Inc. | |
| | Date 02/08/2024 | Full name of contributor Matthew, Solum Contributor address; City; State | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Round Rock, TX 78681 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | N/A | | | N/A | | | |
| | Date 01/28/2024 | Full name of contributor McCarty, Camron Contributor address; City; State | out-of-state PAC (ID#: ; Zip Code |) | | Amount of Contribution (\$) | \$5.00 |
| | | Round Rock, TX 78681 | | | | | |
| | Principal occu Baker | pation / Job title (See Instructions) | | Employer (See Instructions Nate's baked | 5) | | |
| | Date 01/28/2024 | Full name of contributor McCarver, Kim Contributor address; City; State Pflugerville, TX 78660 | out-of-state PAC (ID#:; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu Tech Analys | pation / Job title (See Instructions) | | Employer (See Instructions Apple | <u>(</u> | | |
| | Date 02/10/2024 | Full name of contributor Melissa, Ramey Contributor address; City; State Georgetown, TX 78626 | out-of-state PAC (ID#:; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Maintenance | pation / Job title (See Instructions) | | Employer (See Instructions Cushman Wakefield | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBU | JTION | IS | | SCHEDUL | E A1 |
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| | The Instruc | ction Guide explains how to complete t | this for | n. | 1 | Total pages Schedule A1: Sch: 17/29 Rpt: 20/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/06/2024 | Full name of contributor out-of-state PAC Melva, Wallace Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$500.00 |
| _ | Deignigal | Flower Mound, TX 75022 | ام | Franksian (Cookastinostinos | | | |
| 8 | Education | pation / Job title (See Instructions) | 9 | Employer (See Instructions HTU | S) | | |
| | Date 02/21/2024 | Full name of contributor out-of-state PAG Misty, Silcox Contributor address; City; State; Zip Code | |) | • | Amount of Contribution (\$) | \$7.00 |
| | Principal occu | FORT WORTH, TX 76179 pation / Job title (See Instructions) | | Employer (See Instructions | <u>s)</u> | | |
| | Catering Mai | | | FnG eats | ٠, | | |
| | Date 02/20/2024 | Full name of contributor out-of-state PAG Monica, Bradtke Contributor address; City; State; Zip Code | C (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | | Round Rock, DC 78665 | | | | | |
| | Principal occu Social Work | pation / Job title (See Instructions) | | Employer (See Instructions UT Austin | 5) | | |
| | Date 01/28/2024 | Full name of contributor out-of-state PAC Nelson, Piper Contributor address; City; State; Zip Code Austin, TX 78705 | |) | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Executive Di | pation / Job title (See Instructions) rector | | Employer (See Instructions I Live Here I Give Here | 5) | | |
| | Date 01/28/2024 | Full name of contributor out-of-state PAG Nguyen, Erika Contributor address; City; State; Zip Code Pflugerville, TX 78660 | |) | • | Amount of Contribution (\$) | \$250.00 |
| | • | pation / Job title (See Instructions) larketing & Communications | | Employer (See Instructions FUSE | 5) | | |
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| | MONET | ARY POLITICAL CO | ONTRIBUTION | S | | SCHEDUL | E A1 |
|---|-------------------------------|--|---------------------------------------|--|---|---|-------------|
| | The Instruc | ction Guide explains how to | o complete this forr | n. | 1 | Total pages Schedule A1: Sch: 18/29 Rpt: 21/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 02/14/2024 | Full name of contributor Odus, Evbagharu Contributor address; City; State | out-of-state PAC (ID#: e; Zip Code | | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Principal occu | Katy, TX 77449 pation / Job title (See Instructions) | la la | Employer (See Instructions | _ | | |
| 0 | | tions Director | 9 | Harris County Democrat | | Party | |
| | Date 02/02/2024 | Full name of contributor Oliver, Julie Contributor address; City; State | |) | | Amount of Contribution (\$) | \$100.00 |
| | D: : 1 | Austin, TX 78722 | | | _ | | |
| | Executive Di | pation / Job title (See Instructions) rector | | Employer (See Instructions Ground Game Texas | 5) | | |
| | Date 01/27/2024 | Full name of contributor Osta Lugo, Luis Contributor address; City; State | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$52.00 |
| | Principal occu | Austin, TX 78746 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Software En | | | Knox Networks | | | |
| | Date 02/01/2024 | Full name of contributor Owens, Angela Contributor address; City; State Hutto, TX 78634 | out-of-state PAC (ID#: e; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Systems Ana | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 02/14/2024 | Full name of contributor Pamela, Pearson Contributor address; City; State Austin, TX 78702 | out-of-state PAC (ID#:e; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed |) | | |
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| | MONET | ARY POLITICAL CON | TRIBUTION | S | | SCHEDUI | LE A1 |
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| | The Instru | ction Guide explains how to co | mplete this form | n. | 1 | Total pages Schedule A1: Sch: 19/29 Rpt: 22/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | on Filers) |
| 4 | Date 02/09/2024 | Pamela, Rickel | of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$52.00 |
| | | Hutto, TX 78634 | | | | | |
| 8 | Principal occu REALTOR | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self | 5) | | |
| | Date 02/21/2024 | Full name of contributor out- Pamela, Smith Contributor address; City; State; Zip | | | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu | Round Rock, TX 78665 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Home Health | | | In-Home Attendant Care | | | |
| | Date 02/10/2024 | Full name of contributor out- Patti, Summerville Contributor address; City; State; Zip | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$25.00 |
| | | Pearland, TX 77581 | | | | | |
| | Principal occu Not Employe | pation / Job title (See Instructions) ed | | Employer (See Instructions Not Employed | 5) | | |
| | Date 02/12/2024 | Full name of contributor out- Planned Parenthood Texas Vote Contributor address; City; State; Zip Austin, TX 78704 | |) | | Amount of Contribution (\$) | \$2,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 02/17/2024 | Full name of contributor out- Precious, Byrd Harris Contributor address; City; State; Zip Austin, TX 78702 | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu VP | pation / Job title (See Instructions) | | Employer (See Instructions Measure | 5) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | IS | | SCHEDUL | E A1 |
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| | The Instruc | ction Guide explains how | to complete this for | n. | 1 | Total pages Schedule A1: Sch: 20/29 Rpt: 23/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/27/2024 | 5 Full name of contributor [Prejean, Brandi6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code | | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | | Austin, TX 78735 | 1- | | | | |
| 8 | Principal occu Lawyer | pation / Job title (See Instructions) | 9 | Employer (See Instructions Thornton, Biechlin, Rey | • | ds & Guerra | |
| | Date 01/26/2024 | Full name of contributor [Price, Jared Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Austin, TX 78703 pation / Job title (See Instructions) | | Employer (See Instructions | رد ا | | |
| | Not Employe | | | Not Employed | ,, | | |
| | Date 01/29/2024 | Full name of contributor Richardson, Corrine Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code | | | Amount of Contribution (\$) | \$52.00 |
| | | Cedar Park, TX 78613 | | | | | |
| | Principal occu Student | pation / Job title (See Instructions) | | Employer (See Instructions Student | s) | | |
| | Date 02/22/2024 | Full name of contributor Robert, Rutishauser Contributor address; City; Sta Austin, TX 78731 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed | 5) | | |
| | Date 02/10/2024 | Full name of contributor Robin, Stewart Contributor address; City; Sta Georgetown, TX 78633 | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed | s) | | |
| | | | • | | | | |

| The Instruction Guide explains how to complete this form. Sch: 2 | SCHEDULE A1 |
|--|---------------------------------------|
| Carroll, Angel (Ms.) 4 Date | ages Schedule A1: :1/29 Rpt: 24/44 |
| Date O1/29/2024 S Full name of contributor Out-of-state PAC (ID#: | (Ethics Commission Filers) |
| 01/29/2024 Robles, Samantha 6 Contributor address; City; State; Zip Code Austin, TX 78723 8 Principal occupation / Job title (See Instructions) Self Date 02/14/2024 Rudolph, Metayer Contributor address; City; State; Zip Code Pflugerville, TX 78660 Principal occupation / Job title (See Instructions) Lawyer Date 01/31/2024 Full name of contributor out-of-state PAC (ID#: | |
| Austin, TX 78723 B Principal occupation / Job title (See Instructions) Self Date O2/14/2024 Full name of contributor out-of-state PAC (ID#: Amount Rudolph, Metayer Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Lawyer Date O1/31/2024 Full name of contributor out-of-state PAC (ID#: Amount Graves Dougherty Date O1/31/2024 Full name of contributor out-of-state PAC (ID#: Amount Graves Dougherty Date O1/31/2024 Full name of contributor out-of-state PAC (ID#: Amount Graves Dougherty Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 Date O2/09/2024 Full name of contributor out-of-state PAC (ID#: Amount Graves Dougherty) Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 Full name of contributor out-of-state PAC (ID#: Amount Graves Dougherty) Principal occupation / Job title (See Instructions) Sales Amount Graves Dougherty Amount Graves Dougherty | t of Contribution (\$) \$200.0 |
| B Principal occupation / Job title (See Instructions) Self Date O2/14/2024 Pfull name of contributor Rudolph, Metayer Contributor address; City; State; Zip Code Pflugerville, TX 78660 Principal occupation / Job title (See Instructions) Lawyer Date O1/31/2024 Rutishauser, Robert Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 SIMON, ROBINSON Contributor address; City; State; Zip Code Pflugerville, TX 78613 Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 SIMON, ROBINSON Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales PRODUCTS AND SERVICES, Date Full name of contributor out-of-state PAC (ID#: O1/31/2024 Schwart, Cynthia Amount O1/31/2024 Schwart, Cynthia Amount O1/31/2024 Schwart, Cynthia | |
| Date Pflugerville, TX 78660 Principal occupation / Job title (See Instructions) Amount O1/31/2024 Rutishauser, Robert Contributor address; City; State; Zip Code Cedar Park, TX 78613 Employer (See Instructions) Amount O1/31/2024 Schwart, Cynthia Out-of-state PAC (ID#: | |
| O2/14/2024 Rudolph, Metayer Contributor address; City; State; Zip Code Pflugerville, TX 78660 Principal occupation / Job title (See Instructions) Lawyer | |
| Principal occupation / Job title (See Instructions) Lawyer Date 01/31/2024 Principal occupation / Job title (See Instructions) Lawyer Date 01/31/2024 Principal occupation / Job title (See Instructions) Amount O1/31/2024 Principal occupation / Job title (See Instructions) Not Employed Date 02/09/2024 Pull name of contributor out-of-state PAC (ID#: | t of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Lawyer Date O1/31/2024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Graves Dougherty Amount O1/31/2024 Rutishauser, Robert Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 Full name of contributor out-of-state PAC (ID#: | \$75.0 |
| Principal occupation / Job title (See Instructions) Lawyer Date O1/31/2024 Full name of contributor out-of-state PAC (ID#: | |
| Date Full name of contributor out-of-state PAC (ID#: | |
| Date Full name of contributor out-of-state PAC (ID#: | |
| O1/31/2024 Rutishauser, Robert Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales Principal occupation / Job title (See Instructions) Sales Principal occupation / Job title (See Instructions) Sales PT PRODUCTS AND SERVICES, Amount O1/31/2024 Schwart, Cynthia | |
| Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Not Employed Date 02/09/2024 Full name of contributor out-of-state PAC (ID#: | t of Contribution (\$) |
| Austin, TX 78731 Principal occupation / Job title (See Instructions) Not Employed Date 02/09/2024 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales Date Full name of contributor out-of-state PAC (ID#:) Amount out-of-state PAC (ID#:) Amount out-of-state PAC (ID#:) Amount out-of-state PAC (ID#:) Amount out-of-state PAC (ID#:) Schwart, Cynthia | \$200.0 |
| Principal occupation / Job title (See Instructions) Not Employed Date O2/09/2024 Full name of contributor SIMON, ROBINSON Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales PT PRODUCTS AND SERVICES, Date Full name of contributor Out-of-state PAC (ID#:) Amount O1/31/2024 Schwart, Cynthia | |
| Not Employed Date | |
| Date Full name of contributor out-of-state PAC (ID#: | |
| O2/09/2024 SIMON, ROBINSON Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales Employer (See Instructions) PT PRODUCTS AND SERVICES, Date O1/31/2024 Schwart, Cynthia | |
| Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales Employer (See Instructions) PT PRODUCTS AND SERVICES, Date Full name of contributor out-of-state PAC (ID#:) Amount 01/31/2024 Schwart, Cynthia | t of Contribution (\$) |
| Contributor address; City; State; Zip Code Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Sales Employer (See Instructions) PT PRODUCTS AND SERVICES, Date Full name of contributor out-of-state PAC (ID#:) Amount 01/31/2024 Schwart, Cynthia | \$10.0 |
| Principal occupation / Job title (See Instructions) Sales Employer (See Instructions) PT PRODUCTS AND SERVICES, Date Full name of contributor out-of-state PAC (ID#:) Amount 01/31/2024 Schwart, Cynthia | |
| Sales PT PRODUCTS AND SERVICES, Date Full name of contributor out-of-state PAC (ID#:) Amount 01/31/2024 Schwart, Cynthia | |
| 01/31/2024 Schwart, Cynthia | , INC |
| | t of Contribution (\$) |
| | \$100.0 |
| Contributor address; City; State; Zip Code | |
| Austin, TX 78731 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Executive Assistant Garry Mauro | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | JNS | SCHEDULE A1 | ı |
|---|---|---|-------------------------|---|---|-----|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 Total pages Schedule A1: Sch: 22/29 Rpt: 25/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 Filer ID (Ethics Commission Filers) 00087746 | |
| 4 | Date 01/30/2024 | 5 Full name of contributor Scott, Passion6 Contributor address; City; St | out-of-state PAC (ID#:_ | | 7 Amount of Contribution (\$) \$10 | .00 |
| | | Houston, TX 77021 | | | | |
| 8 | Principal occu Director of C | pation / Job title (See Instructions | s) | 9 Employer (See Instructions Measure | s) | |
| | Date Full name of contributor out-of-state PAC (ID#:) 01/26/2024 Shefman, Lenore Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$52 | .00 | |
| | austin, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | |
| | Date 02/06/2024 | Full name of contributor out-of-state PAC (ID#:) | | Amount of Contribution (\$) \$500 | .00 | |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions Adisa Communications | s) | |
| | Date 01/31/2024 | Full name of contributor Smith, Rose Contributor address; City; S | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) \$500 | .00 |
| | Principal occu Non-Profit | Austin, TX 78722 pation / Job title (See Instructions | s) | Employer (See Instructions Black Women In Busine | | |
| | Date 02/03/2024 | Full name of contributor Solum, Matthew Contributor address; City; S Round Rock, TX 78681 | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) \$100 | .00 |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions N/A | I S) | |
| | | | | | | |

| | MONET | ARY POLITICAL C | CONTRIBUTION | NS | | SCHEDUL | E A1 |
|---|--|--|---|---|-----------------------------|---|-------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 23/29 Rpt: 26/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commissio 00087746 | n Filers) |
| 4 | Date 02/20/2024 | 5 Full name of contributor Spencer, Bounds6 Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | | 7 | Amount of Contribution (\$) | \$25.00 |
| | | Odessa, TX 79762 | 1 | | | | |
| 8 | Principal occu Account Mar | pation / Job title (See Instructions nager | 9 | Employer (See Instruction: Townsquare Media | s) | | |
| | Date 02/06/2024 | Full name of contributor Stacy, Suits Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | Austin, TX 78745 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | s) | | | |
| | Constable | (| , | Travis County | -, | | |
| | Date 02/23/2024 | Full name of contributor out-of-state PAC (ID#:) Stempko, Jessica Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 | |
| | | Round Rock, TX 78681 | | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instruction: | s) | | |
| | Date 02/12/2024 | Full name of contributor Stephen, Blackson Contributor address; City; St Austin, TX 78750 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Not Employe | pation / Job title (See Instructionsed | () | Employer (See Instruction: Not Employed | s) | | |
| | Date 02/07/2024 | Full name of contributor Steve, Howard Contributor address; City; St | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Not Employe | pation / Job title (See Instructionsed |) | Employer (See Instruction: | s) | | |
| | | | 1 | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | |
|---|---|---|---------------------------------|--|-----------------------------|---|-----------|--|
| | The Instru | ction Guide explains how to complete | this for | n. | 1 | Total pages Schedule A1: Sch: 24/29 Rpt: 27/44 | | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) | |
| 4 | Date 01/31/2024 | 5 Full name of contributor out-of-state Prostyles, Jameila 6 Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$250.00 | |
| Ω | Dringinal occu | Pflugerville, TX 78660 pation / Job title (See Instructions) | la | Employer (See Instructions | <u>-,</u> | | | |
| 0 | DEI Consulta | | 9 | MSC | >) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 01/27/2024 Summerville, Patti Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$50.00 | | | |
| | Austin, TX 78703 | | | | | | | |
| | Principal occupation / Job title (See Instructions) Employe Consultant Self | | Employer (See Instructions Self | s) | | | | |
| | Date 02/09/2024 | Full name of contributor out-of-state PAC (ID#:) Terry, Hucks Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$100.00 | | |
| | | Georgetown, TX 78628 | | | | | | |
| | Principal occu Business De | pation / Job title (See Instructions) velopment | | Employer (See Instructions Wells Fargo | 5) | | | |
| | Date Full name of contributor out-of-state PAC (ID#: | | - |) | • | Amount of Contribution (\$) | \$200.00 | |
| | Principal occu Elected Office | pation / Job title (See Instructions) sial | | Employer (See Instructions Williamson County | <u>I</u> S) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 02/20/2024 Texas AFL-CIO State COPE Fund Contributor address; City; State; Zip Code Austin, TX 78711 | |) | | Amount of Contribution (\$) | \$500.00 | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | |
|---|---|---|-----------------------------------|--|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how t | o complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 25/29 Rpt: 28/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/28/2024 | 5 Full name of contributor Thompson, Dianne6 Contributor address; City; Stat | out-of-state PAC (ID#:e; Zip Code | | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | | Round Rock, TX 78664 spation / Job title (See Instructions) 9 Employer (See Instructions) | | s) | | | |
| | Date 01/26/2024 | Full name of contributor out-of-state PAC (ID#:) | | | Amount of Contribution (\$) | \$52.00 | |
| | Principal occupation / Job title (See Instructions) Policy | | Employer (See Instructions CTD | 5) | | | |
| | Date 01/31/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 | |
| | Principal occu Commission | Austin, TX 78768 pation / Job title (See Instructions) er | | Employer (See Instructions Travis County | <u> </u> ;) | | |
| | Date 01/28/2024 | Full name of contributor Trirogoff, Felice Contributor address; City; Stat | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Austin, TX 78757 pation / Job title (See Instructions) ions | | Employer (See Instructions | <u> </u> ;) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 01/29/2024 Tschoepe, Christian Contributor address; City; State; Zip Code Austin, TX 78731 | | | | Amount of Contribution (\$) | \$10.00 | |
| | Principal occu Software De | pation / Job title (See Instructions) veloper | | Employer (See Instructions Zendesk | 5) | | |
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| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|---|---|--|------------------------|-----------------------------|--|----------------|---|------------|
| | The Instru | ction Guide explains how | to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 26/29 Rpt: 29/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | | 3 | Filer ID (Ethics Commission 00087746 | on Filers) |
| 4 | Date 02/10/2024 | 5 Full name of contributor Twane, Grays6 Contributor address; City; S | out-of-state PAC (ID#: | |) | 7 | Amount of Contribution (\$) | \$25.00 |
| 8 | Principal occu | Irving, TX 75053 pation / Job title (See Instructions | s) | 9 | Employer (See Instructions | <u> </u> s) | | |
| | Analyst | (| , | | TXU Energy | , | | |
| | Date 02/12/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 | | |
| | Principal occu | Austin, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | ·) | | |
| | i iliicipai occu | pation / 300 title (300 matractions | , | | Employer (See manuellons | " | | |
| | Date 02/13/2024 | Full name of contributor out-of-state PAC (ID#:) Wade, Roquemore Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$500.00 | | |
| | | Gerogetown, TX 78628 | | | | | | |
| | Principal occu Not Employe | pation / Job title (See Instructionsed | 5) | | Employer (See Instructions Not Employed | s) | | |
| | Date Full name of contributor out-of-state PAC (ID#: | | | • | Amount of Contribution (\$) | \$250.00 | | |
| | Principal occu CEO | pation / Job title (See Instructions | 5) | | Employer (See Instructions Proskill Solutions, Inc | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 01/31/2024 Washington, Mia Contributor address; City; State; Zip Code Austin, TX 78714 | | • | Amount of Contribution (\$) | \$250.00 | | | |
| | Principal occu Owner | pation / Job title (See Instructions | 5) | | Employer (See Instructions Mia the Event Diva | s) | | |
| | | | - | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTION | S | | SCHEDUL | E A1 |
|---|--|--|------------------------|--------------------------------------|-----------------------------|---|-------------|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 27/29 Rpt: 30/44 | |
| | FILER NAME Carroll, Ange | el (Ms.) | | | 3 | Filer ID (Ethics Commission 00087746 | n Filers) |
| 4 | Date 01/28/2024 | 5 Full name of contributor Watson, Soleece | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$250.00 |
| | | Round Rock, TX 78681 | | | | | |
| | Principal occu Executive Di | pation / Job title (See Instructions) rector | | Employer (See Instructions Anewentry | 5) | | |
| | Date 01/29/2024 | Full name of contributor White, Kelly Contributor address; City; State; | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu | Austin, TX 78746 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | CEO | pation / 300 title (See Instructions) | | LIFT Alliance | ·) | | |
| | Pate Full name of contributor out-of-state PAC (ID#:) 2/23/2024 Whitlow, Stuart Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | | Austin, TX 78759 | | | | | |
| ı | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Date O2/16/2024 Full name of contributor out-of-state PAC (ID#: William, Brogden Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$10.00 | |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions none | <u> </u> ;) | | |
| | Date 02/11/2024 | Full name of contributor William, Perrenod Contributor address; City; State; | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | | New Orleans, LA 70117 | | | | | |
| | | pation / Job title (See Instructions) siness Consultant | | Employer (See Instructions Self | 5) | | |
| | | | · | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N _ | IS | | SCHEDULE | A1 |
|---|---|---|------------------------|--------|---|----------------|---|-----------|
| | The Instru | ction Guide explains how | to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 28/29 Rpt: 31/44 | |
| 2 | FILER NAME Carroll, Ange | el (Ms.) | | | | 3 | Filer ID (Ethics Commission 00087746 | Filers) |
| 4 | Date 01/27/2024 | 5 Full name of contributor Zanetis, Ashley6 Contributor address; City; St | out-of-state PAC (ID#: | |) | 7 | Amount of Contribution (\$) | \$40.00 |
| | | Austin, TX 78702 | | | | | | |
| 8 | | pation / Job title (See Instructions gineering manager | ·) | 9 | Employer (See Instructions Resideo | s) | | |
| | Date 02/06/2024 | Z/06/2024 Zeena, Querbach Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$52.00 | | |
| | Austin, TX 78737 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | Employer (See Instructions | <u> </u> s) | | |
| | Event Plann | er | | | ButterFly Bridal & Event | ts | | |
| | Date 01/28/2024 | Full name of contributor out-of-state PAC (ID#:) gair, aja Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$40.00 | | |
| | | Austin, TX 78702 | | | | | | |
| | Principal occu Consultant | pation / Job title (See Instructions |) | | Employer (See Instructions Self | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#: 01/27/2024 maguire, sunny Contributor address; City; State; Zip Code Brooklyn, NY 11226 | |) | | Amount of Contribution (\$) | \$25.00 | | |
| | Principal occu Social Work | pation / Job title (See Instructions Educator |) | | Employer (See Instructions self | 5) | | |
| | Date 02/14/2024 | Full name of contributor out-of-state PAC (ID#:) stephanie, schindler Contributor address; City; State; Zip Code Round Rock, TX 78681 | | | Amount of Contribution (\$) | \$10.00 | | |
| | Principal occu Not Employe | pation / Job title (See Instructions ed |) | | Employer (See Instructions Not Employed | s) | | |
| | | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | SCHEDULE A1 |
|---|---|------|---|
| | The Instruction Guide explains how to complete this form. | - 1 | Total pages Schedule A1: Sch: 29/29 Rpt: 32/44 |
| 2 | FILER NAME Carroll, Angel (Ms.) | - 1 | Filer ID (Ethics Commission Filers) 00087746 |
| 4 | Date 01/27/2024 5 Full name of contributor out-of-state PAC (ID#:) tennant, amanda 6 Contributor address; City; State; Zip Code | 7 / | Amount of Contribution (\$) \$25.00 |
| 8 | Austin, TX 78738 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction | ns) | |
| 0 | Not Employed Not Employed Not Employed | 113) | |
| | | | |
| | | | |

| LOANS | | | | SCHEDULE E |
|--------------------------------------|---|-------------------------------|-------------------|---|
| The Instruction | on Guide explains how to complete this f | orm. | 1 | ges Schedule E: 1 Rpt: 33/44 |
| 2 FILER NAME Carroll, Angel (N | Ms.) | | 3 Filer ID 000877 | (Ethics Commission Filers) 46 |
| 4 TOTAL OF UN | NITEMIZED LOANS | | | \$ |
| 5 Date of loan 01/31/2024 | 7 Name of lender out-of-state PA Carroll, Angel | C (ID#: |) | 9 Loan Amount (\$) \$106.36 |
| 6 Is lender a financial institution? | 8 Lender address; City; State; | Zip Code | | 10 Interest Rate 11 Maturity Date |
| No | Hutto, TX 78634 | | | II Maturity Date |
| 12 Principal occupation | on / Job title (See Instructions) | 13 Employer (See Instructions | 5) | |
| 14 Description of Col | lateral | 15 Check if personal funds we | ere deposited | into political account (See Instructions) |
| 16 GUARANTOR INFORMATION | 17 Name of guarantor | | | 19 Amount Guaranteed (\$) |
| X not applicable | 18 Guarantor address; City; State; | Zip Code | | |
| 20 Principal occupati | <u>l</u> on | 21 Employer (See Instructions | 5) | |
| | | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to compl | lete this form. |
|----------|---|--|--|
| 1 | Total pages Schedule F1: | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 1/11 Rpt: 34/44 | Carroll, Angel (Ms.) | 00087746 |
| 4 | Date | 5 Payee name | |
| | 01/28/2024 | ActBlue Technical Services | |
| 6 | Amount (\$) \$238.03 | 7 Payee address; City; State; Zip Code 366 Summer Street | |
| | Φ230.03 | 300 Summer Street | |
| | | Somerville, MA 02144 | |
| 8 | PURPOSE | | Description |
| | OF EXPENDITURE | Fees | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITORE | | Check if Austin, TX, officeholder living expense Act Blue Fees |
| | | | Act blue rees |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | |
| | Date | Payee name | |
| | 02/04/2024 | ActBlue Technical Services | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$219.52 | 366 Summer Street | |
| | | 0 | |
| | | Somerville, MA 02144 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Fees | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | 1003 | Check if Austin, TX, officeholder living expense |
| | | | Act Blue Fees |
| L | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | • | Office field |
| H | Date | Payee name | |
| | 02/14/2024 | ActBlue Technical Services | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$182.86 | 366 Summer Street | |
| | | | |
| | | Somerville, MA 02144 | |
| | PURPOSE OF | , , , | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Fees | Check if Austin, TX, officeholder living expense |
| | | | Act Blue Fees |
| | 0 1: 0::::::::::::::::::::::::::::::::: | | 000 |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | Office held |
| \vdash | | | |
| | | | |
| l | | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | enter a category not listed above) |
|----------|----------------------------|---|------------------------------------|
| 1 | Total pages Schedule F1: | · | (Ethics Commission Filers) |
| | Sch: 2/11 Rpt: 35/44 | Carroll, Angel (Ms.) 00087 | 746 |
| 4 | Date | 5 Payee name | |
| | 02/22/2024 | ActBlue Technical Services | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| l | \$124.72 | 366 Summer Street | |
| | | | |
| | | Somerville, MA 02144 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Fees Check if travel outside of Texa | |
| | | Check if Austin, TX, officeholde Act Blue Fees | er living expense |
| | | 7 tot Blue 1 ces | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Off | ice held |
| ľ | expenditure to benefit C/O | | ide field |
| ⊨ | Date | Power name | |
| | 01/27/2024 | Payee name Alamo Coffee | |
| L | | | |
| | Amount (\$) \$7.72 | | |
| | Φ1.12 | 1021 Selidelo Spilligs Dilve | |
| | | Deviad Deals TV 70004 | |
| L | | Round Rock, TX 78681 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | c. Complete Schodule T |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texa Check if Austin, TX, officeholds | |
| | | Community Event | |
| | | | |
| Г | Complete ONLY if direct | U | ice held |
| | expenditure to benefit C/O | JH | |
| | Date | Payee name | |
| | 01/26/2024 | Amazon | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$172.11 | PO BOX 960013 | |
| | | | |
| | | Orlando, FL 32896 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | • |
| l | LAI LINDITORE | Check if Austin, TX, officeholds | er living expense |
| | | Office Supplies | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Off | ice held |
| | expenditure to benefit C/O | | ICC HEIU |
| \vdash | | | |
| | | | |
| | | | |

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitl/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/Contract Labor

| | Candidate/Officeholder/Politica Credit Card Payment | | |
|---|--|---|----|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers | 5) |
| | Sch: 3/11 Rpt: 36/44 | Carroll, Angel (Ms.) 00087746 | |
| 4 | Date | 5 Payee name | |
| | 02/09/2024 | Bernie Soul Kitchen | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$31.57 | 2400 S I-35 Frontage Road St. 160 | |
| | | | |
| | | Round Rock, TX 78681 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. | |
| | | Check if Austin, TX, officeholder living expense Food and Beverage Expense | |
| | | 1 ood and Beverage Expense | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/Oh | | |
| | Date | Payee name | |
| | 02/22/2024 | Blomgren, Samuel | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$208.00 | 11608 Spicewood Pkwy Unit 26 | |
| | | | |
| | | Austin, TX 78750 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. | |
| | | Check if Austin, TX, officeholder living expense Paid Canvasser | |
| | | Tad Sanvassi | |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OH | н | |
| | Date | Payee name | |
| | 02/06/2024 | Blue Victory Communications | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$149.34 | PO Box 300624 | |
| | | | |
| | | Austin, TX 78703 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. | |
| | | Check if Austin, TX, officeholder living expense Website | |
| | | Avenoue | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/O | U | |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|-------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 4/11 Rpt: 37/44 | Carroll, Angel (Ms.) 00087746 |
| 4 | Date | 5 Payee name |
| | 02/09/2024 | CMS Vending |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1.75 | 1510 Randolph Street 401 |
| | | |
| | | Carrollton, TX 75006 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Water at Event |
| | | vator at Event |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/OI | |
| ⊨ | Date | |
| | Date | Payee name |
| L | 01/26/2024 | Chick-Fil-A |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5.78 | 387 E Farm to Market Road 1382 |
| | | |
| | | Cedar Hill, TX 75104 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense |
| | | Check if Austin, TX, officeholder living expense |
| | | Food and Beverage Expense |
| L | Computate ONII V if diseast | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | |
| ┕ | | |
| | Date | Payee name |
| | 02/22/2024 | Cooper, Sean |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$156.00 | 1833 Cheddar Loop Rd APT 314 |
| | | |
| | | Austin, TX 78728 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense |
| | | Paid Canvasser |
| L | Computate ONU V # stiller | Condidate/Officeholder name |
| 1 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| ldash | | |
| | | |
| L | | |

SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gi Candidate/Officeholder/Political Committee Le

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|-----------------------------|--|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| | Sch: 5/11 Rpt: 38/44 | Carroll, Angel (Ms.) 00087746 |
| 4 | Date | 5 Payee name |
| | 02/22/2024 | Desta, Phoebe |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$170.00 | 13401 Metric Blvd apt 1327 |
| | | |
| | | Austin, TX 78727 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense Paid Canvasser |
| | | Faiu Carivasser |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/OI | |
| _ | | |
| | Date | Payee name |
| | 02/20/2024 | Fairmont |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$37.19 | 101 Red River St |
| | | |
| | | Austin, TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense |
| | | Expense |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 02/20/2024 | Fairmont |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$31.39 | 101 Red River St |
| | Ψ01.00 | 101 104 11101 01 |
| | | Austin, TX 78701 |
| | PURPOSE | |
| | OF | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Staff Food and Beverage Expense |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officenoider/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 6/11 Rpt: 39/44 | Carroll, Angel (Ms.) 00087746 |
| 4 | Date | 5 Payee name |
| | 02/20/2024 | Fairmont |
| 6 | Amount (\$) \$30.99 | 7 Payee address; City; State; Zip Code 101 Red River St |
| | | Austin, TX 78701 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and Beverage Expense |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 02/05/2024 | Google |
| | Amount (\$) \$23.03 | Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 |
| | PURPOSE | |
| | OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Domain Workspace |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 01/29/2024 | HEB - Gas |
| | Amount (\$) \$31.28 | Payee address; City; State; Zip Code 5008 Gattis School Road |
| | | Hutto, TX 78634 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel Expense |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 7/11 Rpt: 40/44 | Carroll, Angel (Ms.) 00087746 |
| 4 | Date | 5 Payee name |
| | 02/09/2024 | HEB Gas |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$39.67 | 5000 Gattis School Rd. |
| | | |
| | | Hutto, TX 78634 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Transportation Equipment & Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Travel Expense |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 02/17/2024 | HEB Gas |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$30.00 | 5000 Gattis School Rd. |
| | | |
| | | Hutto, TX 78634 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T. |
| | | Expense Check if Austin, TX, officeholder living expense Travel Expense |
| | | Travel Expense |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 02/21/2024 | HEB Gas |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$23.69 | 5000 Gattis School Rd. |
| | | |
| | | Hutto, TX 78634 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Transportation Equipment & Related |
| | LAI LINDITORE | Expense Check if Austin, TX, officeholder living expense |
| | | Travel Expense |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete th | his form. | | | | | |
|---|---|--|---|--|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | | |
| | Sch: 8/11 Rpt: 41/44 | Carroll, Angel (Ms.) | 00087746 | | | | | |
| 4 | Date | 5 Payee name | • | | | | | |
| | 01/29/2024 | HEB | | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | |
| | \$71.98 | 1000 E 41st St | | | | | | |
| | | | | | | | | |
| | | Austin, TX 78751 | | | | | | |
| 8 | PURPOSE | | scription | | | | | |
| | OF | · · · · · · · · · · · · · · · · · · · | Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | EXPENDITURE | | Check if Austin, TX, officeholder living expense | | | | | |
| | | Eve | ent Food | | | | | |
| | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | Office held | | | | | |
| | experience to benefit Gree | | | | | | | |
| | Date | Payee name | | | | | | |
| | 02/13/2024 | Just Yard Signs | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | | |
| | \$1,214.10 | 2235 Mercator Dr. | | | | | | |
| | | | | | | | | |
| | | Orlando, FL 32807 | | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Des | scription | | | | | |
| | OF EXPENDITURE | Advertising Expense | Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | · | Check if Austin, TX, officeholder living expense rd Signs | | | | | |
| | | ı a | itu Sigris | | | | | |
| - | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | | | | |
| | expenditure to benefit C/O | 9 | Cinice field | | | | | |
| - | Date | Davies name | | | | | | |
| | 02/12/2024 | Payee name Lamppost Coffee | | | | | | |
| | | | | | | | | |
| | Amount (\$) \$7.04 | Payee address; City; State; Zip Code 109 East St | | | | | | |
| | Φ1.04 | 109 East St | | | | | | |
| | | LIVE TV 70004 | | | | | | |
| | | Hutto, TX 78634 | | | | | | |
| | PURPOSE OF | , , , | SCRIPTION Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | EXPENDITURE | 1 000/Develage Expense | Check if Austin, TX, officeholder living expense | | | | | |
| | | | enstituent meeting | | | | | |
| | | | | | | | | |
| Г | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | | | | |
| | expenditure to benefit C/O | 1 | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| l | | | | | | | | |

SCHEDULE F1

Advertising Expense Even
Accounting/Banking Fees
Consulting Expense Food
Contributions/ Donations Made By - Gift/

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | |
|----------|--|--|----|
| 1 | Total pages Cabadula F1: | · · · · · · · · · · · · · · · · · · · | .) |
| 1 | 1 0 | |) |
| L | Sch: 9/11 Rpt: 42/44 | Carroll, Angel (Ms.) 00087746 | |
| 4 | Date | 5 Payee name | |
| | 02/07/2024 | Loomly LLC. | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| ١ | \$44.69 | 6850 Austin Center Blvd. Ste. 180 | |
| | Ψ14.00 | South Strain Stories 200 | |
| | | A 41' - TV 70704 | |
| | | Austin, TX 78731 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Advertising Expense | |
| | | Check if Austin, TX, officeholder living expense | |
| | | Advertising | |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | in the state of th | |
| | Date | Payee name | _ |
| | 02/05/2024 | NGP VAN | |
| _ | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$159.90 | 655 15th St NW, Suite 650 | |
| | Ψ133.30 | OSS ISTRICTIVE, SUITE OSS | |
| | | | |
| | | Washington, DC 20005 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Solicitation/Fundraising Expense | |
| | LAI LINDITORL | Check if Austin, TX, officeholder living expense | |
| | | Email Software | |
| L | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | H | |
| | Date | Payee name | |
| | 02/12/2024 | NGP VAN | |
| <u> </u> | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$106.60 | | |
| | \$100.0U | 655 15th St NW, Suite 650 | |
| | | | |
| L | | Washington, DC 20005 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | |
| | LAI LINDITORL | Check if Austin, TX, officeholder living expense | |
| | | Email Software | |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | n - | |
| | | | |
| | | | |
| | | | |

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

| | Credit Card Payment | The Instruction Guide explains how to comp | lete this form. | | |
|---|---|--|----------------------|------------------------|----------------------------|
| 1 | Total pages Schedule F1: | | 3 | B Filer ID | (Ethics Commission Filers) |
| | Sch: 10/11 Rpt: 43/44 | Carroll, Angel (Ms.) | | 00087746 | |
| 4 | Date | 5 Payee name | | | |
| | 01/28/2024 | PhoneBurner | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | |
| | \$158.83 | 1968 S. Coast Hwy | | | |
| | | Suite 1800 | | | |
| | | Laguna Beach, CA 92651 | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Description | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | Check if travel ou | tside of Texas. Con | |
| | LXI LINDITORE | | _ | X, officeholder living | g expense |
| | | | Dialer Software | е | |
| _ | Operation ONLY if dispose | Out lide to 10 ff and all decreases | | O#: I- | -1.1 |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | I | Office h | eia |
| | | | | | |
| | Date | Payee name | | | |
| | 02/21/2024 | Pinthouse Pizza | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | |
| | \$14.40 | 2800 Hoppe Trail | | | |
| | | | | | |
| | | Round Rock, TX 78681 | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Description | | |
| | OF EXPENDITURE | Event Expense | ш | tside of Texas. Con | |
| | EX. ENDITORE | | _ | X, officeholder living | g expense |
| | | | Event Food | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | <u> </u> | Office h | ald |
| | expenditure to benefit C/O | • | L | Office II | eiu |
| | | | | | |
| | Date | Payee name | | | |
| | 01/29/2024 | Poke House | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | |
| | \$37.65 | 201 University Oaks Blvd | | | |
| | | | | | |
| | | Round Rock, TX 78665 | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Description | | |
| | OF EXPENDITURE | Food/Beverage Expense | ш | tside of Texas. Con | |
| | EX. ENDITORE | | ш. | X, officeholder living | g expense |
| | | | Volunteer Mea | LI . | |
| | Complete ONE V if direct | Condidate/Officeholder parts | | Office I | ald |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | L | Office h | eiu |
| | | | | | |
| | | | | | |
| | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to comple | ete this form. | | | |
|---|---|--|----------------|-------|---------------------|------------------------------|
| 1 | Total pages Schedule F1: | | | | Filer ID | (Ethics Commission Filers) |
| | Sch: 11/11 Rpt: 44/44 | Carroll, Angel (Ms.) | | | 00087746 | |
| 4 | Date 02/19/2024 | 5 Payee name Rio Grande | | | | |
| 6 | Amount (\$) \$12.10 | 7 Payee address; City; State; Zip Code 551 Ed Schmidt Blvd | | | | |
| | | Hutto, TX 78634 | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | _ | TX, c | officeholder living | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | | | Office he | eld |
| _ | Date | Payee name | | | | |
| | 02/22/2024 | Smith, Sequoia | | | | |
| | Amount (\$) \$238.00 | Payee address; City; State; Zip Code 1951 Aquarena Springs Drive Apt 1103 | | | | |
| | | San Marcos, TX 78666 | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | — | TX, c | e of Texas. Comp | olete Schedule T. expense |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | | | Office he | eld |
| | Date | Payee name | | | | |
| | 02/22/2024 | Tybor, Gabriel | | | | |
| | Amount (\$) \$238.00 | Payee address; City; State; Zip Code 1951 Aquarena Springs Dr Apt 1103 | | | | |
| | | San Marcos, TX 78666 | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | 므 | TX, c | e of Texas. Comp | olete Schedule T. expense |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | | | Office he | eld |
| | | | | | | |