

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00081605		2 Total pages filed: 83		<b>OFFICE USE ONLY</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Nathan M.	MI	Date Received <b>ELECTRONICALLY FILED</b> 03/01/2024	
	NICKNAME	LAST Johnson	SUFFIX		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)			
	Date Hand-delivered or Date Postmarked				
Receipt #			Amount		
Date Processed					
Date Imaged					
5 ORIGINAL PERIOD COVERED	Month Day Year 01/26/2024	THROUGH	Month Day Year 02/24/2024		

6 EXPLANATION OF CORRECTION  
This report is being amended to include in-kind contributions missing from the original report.

7 AFFIDAVIT

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

Check the box next to any and all applicable statements:

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

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

The Honorable Nathan M. Johnson  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00081605	<b>2</b> Total pages filed: 83	
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Nathan M.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b>  03/01/2024
	NICKNAME	LAST Johnson	SUFFIX	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 670994  Dallas, TX 75367-0994		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Sharon	MI	
	NICKNAME	LAST Young	SUFFIX	
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8333 Douglas Avenue Ste. 900 Dallas, TX 75225			
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 855-2942	EXTENSION	
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
<b>9</b> PERIOD COVERED	Month    Day    Year 01/26/2024	THROUGH		Month    Day    Year 02/24/2024
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>11</b> OFFICE	OFFICE HELD (if any) State Senator District 16		<b>12</b> OFFICE SOUGHT (if known) State Senator District 16	

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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**13 C / OH NAME** Johnson, Nathan M. (The Honorable) **14 Filer ID** (Ethics Commission Filers)  
00081605

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

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

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Texas Realtors Political Action Committee
	COMMITTEE ADDRESS	1115 San Jacinto Blvd Ste 200 Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	Cantu, Leslie
	COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 2246  Austin, TX 78768

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	235,804.93
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	3,030.00
	4. TOTAL POLITICAL EXPENDITURES	\$	424,258.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	444,796.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

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

The Honorable Nathan M. Johnson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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<b>18 FILER NAME</b> Johnson, Nathan M. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00081605
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 201,446.84
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 34,358.09
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 424,248.02
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 10.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 5,038.56

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/46 Rpt: 5/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00577155 ) APEX Clean Energy Inc. PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlottesville, VA 22902-5299	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AT&T Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2471	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ablon, Michael B. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3404	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Real estate developer		Employer (See Instructions) PegasusAblon
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abuhamad, Karim N. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7123	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arends, Susan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-1623	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Registered Dietitian		Employer (See Instructions) Texas Health Dallas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/46 Rpt: 6/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Austin, Derst. K (Deke)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-6359	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self employed
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Austin, Derst. K (Deke)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75229-6359	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barksdale, Jay	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Waxahachie, TX 75165-6516	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Barksdale Public Affairs
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beer Alliance of Texas PAC	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78701-2656	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benoy, Sue	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75231-5716	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/46 Rpt: 7/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berman, Jon	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75231-4180		
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Unico
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bourgeois, Robert	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Irving, TX 75062-4506		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Branson, Jacalyn	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Richardson, TX 75080-5820		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brashear, Lynda	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75243-8029		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035675 ) Bristol-Myers Squibb Company PAC	Amount of Contribution (\$)  \$750.00
Contributor address; City; State; Zip Code  Austin, TX 78737-4740		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/46 Rpt: 8/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Rita <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3508	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brotherhood of Locomotive Engineers & Trainmen (PAC) <hr/> Contributor address; City; State; Zip Code  Richland Hills, TX 76118-6372	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brusniak, John Stephen <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132-2024	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Tax Consultant		Employer (See Instructions) Brusniak Property Tax
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryant, Judy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-5883	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryant, Judy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-5883	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/46 Rpt: 9/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buckstein, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78738-6168	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bush, Janie R <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4960	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bush, Janie R <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4960	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00384818</u> ) CVS Health PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004-2448	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carlock, David <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-5513	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/46 Rpt: 10/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carrell, Allyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75231-8155	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Actor		<b>9</b> Employer (See Instructions) Not employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carrell, Karen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cassidy, James <hr/> Contributor address; City; State; Zip Code  Corinth, TX 76210-1721	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00148031</u> ) Caterpillar Employee Political Action Committee <hr/> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642-4031	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chance, Mari <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76904-7401	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/46 Rpt: 11/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clardy, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-6314	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clay, Dorothy <hr/> Contributor address; City; State; Zip Code  Bullhead City, AZ 86429-7710	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coats, Sam <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1972	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cobb Fendley PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77040-6153	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/46 Rpt: 12/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins-Bratton, Calvert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-2942	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Vice President		<b>9</b> Employer (See Instructions) Methodist Health System
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cone, Wendy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1649	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Event Representative		Employer (See Instructions) JURA inc
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00793711 ) Constellation Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001-2133	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cortright, Clyde <hr/> Contributor address; City; State; Zip Code  Weymouth, MA 02189-1018	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cox, Alan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4265	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 9/46 Rpt: 13/83
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crain, William	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code  Dallas, TX 75238-2518	
8 Principal occupation / Job title (See Instructions) Sr. Account Manager		9 Employer (See Instructions) Brenntag Southwest
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DTH Strategies LLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701-1618	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davidson, Giles	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Pittsburgh, PA 15232-2850	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dawson, Lisa	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75230-5049	
Principal occupation / Job title (See Instructions) model agent		Employer (See Instructions) Kim Dawson Agency

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/46 Rpt: 14/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75220-3749		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75220-3749		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dion, Shannon	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Carrollton, TX 75006-5209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dishner, Emma	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75205-1336		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ntidc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/46 Rpt: 15/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dixon, Joyce	<b>7</b> Amount of Contribution (\$)  \$8.46
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-3710		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) None
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dixon-Peabody, Michael	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75243-5703		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downs, John	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75229-6626		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) US Oncology
Date 02/05/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00523233</u> ) EDF Renewables Inc. PAC	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Portland, OR 97205-3060		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) EYE PAC of the Texas Ophthalmological Association	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Austin, TX 78701-1667		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/46 Rpt: 16/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eichorst, Fran <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3443	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fairchild, Ian <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-4125	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Munsch Hardt
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farrier, Sydney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3836	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farrier, Sydney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3836	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fertitta, Tilman <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-9505	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Landry's Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/46 Rpt: 17/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Lawrence <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-5672	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fogarty, Marlene <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75207-6403	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forsythe-Lill, Veletta A. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1104	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of UT Southwestern Medical Center <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1330	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galloway, Helen K <hr/> Contributor address; City; State; Zip Code  Atkinson, NH 03811-0436	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/46 Rpt: 18/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galloway, Helen K <hr/> <b>6</b> Contributor address; City; State; Zip Code  Atkinson, NH 03811-0436	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galloway, Helen K <hr/> Contributor address; City; State; Zip Code  Atkinson, NH 03811-0436	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garland Fire Fighters Community Interest Committee <hr/> Contributor address; City; State; Zip Code  Garland, TX 75046-2341	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Donna <hr/> Contributor address; City; State; Zip Code  Briarcliff, TX 78669-2529	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Michael <hr/> Contributor address; City; State; Zip Code  Allen, TX 75013-4765	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BGE Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/46 Rpt: 19/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gifford, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-6100	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Learning and Development		<b>9</b> Employer (See Instructions) ACT Inc
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodstein, Heather <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2221	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodwin, Rosemary <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-8128	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Zion Lutheran Church
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Heather <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2026	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenberg Traurig P.A. Political Action Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4236	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/46 Rpt: 20/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Griffin, Carol Avis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-5518	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Griffin, Timothy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5935	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grover, Davinder <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2623	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ophthalmology Surgery Center of Dallas
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gulf States Toyota Inc State PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077-2026	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HNTB Holdings Ltd. Political Action Committee <hr/> Contributor address; City; State; Zip Code  Kansas City, MO 64105-1310	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/46 Rpt: 21/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haley, Robert and Stephanie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-5407	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Medical Center
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Half Associates State PAC <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75081-2220	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hammond, Phyllis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-7413	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Anne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75382-0874	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Tamara <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-2611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) LISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 18/46 Rpt: 22/83
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605
4 Date 02/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havran, Jay	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code  Dallas, TX 75219-8517	
8 Principal occupation / Job title (See Instructions) Treasurer		9 Employer (See Instructions) Stonewall Democrats of Dallas
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heard, Victoria	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238-3756	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hein, H.A. Tillmann	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75220-1950	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helsell, Hedy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Dallas, TX 75231-3911	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/46 Rpt: 23/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, LaRue H <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-2021	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, Matthew <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-4340	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Oncor
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hochheim Prairie PAC <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995-1318	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holleman, Virginia <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5832	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hopton-Jones, Gaynelle <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-3468	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/46 Rpt: 24/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Oak Street Health
<b>Date</b> 02/10/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet <hr/> <b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75081-5905	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 02/16/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huit-Zollars Inc. Texas PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75240-2675	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 02/16/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Ray <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75201-2300	<b>Amount of Contribution (\$)</b>  \$2,500.00
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> Hunt Consolidated Energy
<b>Date</b> 02/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75218-4503	<b>Amount of Contribution (\$)</b>  \$20.85
<b>Principal occupation / Job title (See Instructions)</b> Physician		<b>Employer (See Instructions)</b> UT Southwestern



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/46 Rpt: 25/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Independent Bankers Association of Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-1683	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Invenergy Investment Company LLC <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60606-4630	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Invenergy Investment Company LLC <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60606-4630	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ireilly, James <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5510	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jagoda, Jo <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4201	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/46 Rpt: 26/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jagoda, Jo <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-4201	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00308387</u> ) Jim Turner for Congress Committee <hr/> Contributor address; City; State; Zip Code  Crockett, TX 75835-0780	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Anne <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75149-8806	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Jody <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-3938	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) K&L Gates LLP <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201-7342	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/46 Rpt: 27/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kang, Julia	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75063-0013		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerwin MD, Diana	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-5403		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Texas Health
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerwin MD, Diana	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-5403		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Texas Health
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kimmey, Anthony	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Flower Mound, TX 75022-8160		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LJA Engineering Inc.
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korteling, Kathleen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78703-3781		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/46 Rpt: 28/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Kyle	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220-3746		
<b>8</b> Principal occupation / Job title (See Instructions) Federal Employee		<b>9</b> Employer (See Instructions) US Government
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMantia, Lauren Amanda	Amount of Contribution (\$)  \$5,000.00
Contributor address; City; State; Zip Code  Boerne, TX 78015-6557		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) LP5 Investments LLC
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labauve, Glenn	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75211-5920		
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) LaBauve Tax Consulting
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanphier, Marianne	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75080-7207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Gayle	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75231-5320		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/46 Rpt: 29/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Legacy 44 PAC	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78756-3522		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lindsey, Margaret	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Rochester, NY 14625-1711		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lloyd Gosselink Rochelle & Townsend P.C.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701-2478		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Locke Lord LLP	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Houston, TX 77002-2914		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Love, William	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Irving, TX 75039-4208		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) DFW Hospital Council

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/46 Rpt: 30/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacDowell, Kelly <hr/> Contributor address; City; State; Zip Code  Garland, TX 75044-2805	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madsen Miller, Sara <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3648	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) 1820 Productions
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marlett, Charles <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3737	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) American Airlines
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Denise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-5137	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Samsung

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/46 Rpt: 31/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Lisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-2038	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Administrative Asst		<b>9</b> Employer (See Instructions) Self
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Irene <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5503	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazero, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCarroll, Shannon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2137	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/46 Rpt: 32/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRoberts, Hunt <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3501	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Independent Landman		<b>9</b> Employer (See Instructions) Self employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meador, Marston <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007-2764	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mercier, David <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-7308	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Texas Southwestern
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Metropolitan Anesthesia Political Action Committee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4265	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miklos, Robert <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75150-4953	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ferguson Braswell Fraser Kubasta



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/46 Rpt: 33/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Jean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-5056	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murphree, Cathy <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-4902	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nemmers, Joseph <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-7528	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Sales Executive		Employer (See Instructions) Heraeus
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newman, Clarke <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newman, Clarke <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/46 Rpt: 34/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) North Texas Automobile Dealers PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75062-2781	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nutting, Meghan <hr/> Contributor address; City; State; Zip Code  Wheat Ridge, CO 80212-7232	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) EVP of Government and Regulatory Affairs		Employer (See Instructions) Sunnova
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oppenheimer, Jay <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5544	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Orr, Carol <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2147	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) publishing		Employer (See Instructions) self
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Orwig, Melissa <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-2607	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/46 Rpt: 35/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Orwig, Melissa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75231-2607	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Padakandla, Menaca <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75010-1145	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parkhill PAC <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79423-1930	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penn Entertainment Inc. Texas PAC <hr/> Contributor address; City; State; Zip Code  Wyomissing, PA 19610-1247	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perryman, Thomas <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-2835	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Greenhill School

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/46 Rpt: 36/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pfaff, Anne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75062-3818	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poinsett PLLC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2134	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Political Action Committee for Engineers <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-2145	Amount of Contribution (\$)  \$850.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powell, Marjorie <hr/> Contributor address; City; State; Zip Code  Irving, TX 75062-3843	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Attorney		American Airlines
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pruitt, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-6305	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Professor		UT Southwestern Medical Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/46 Rpt: 37/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Raba-Kistner PAC Inc. <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78249-2232	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reyes, Mario <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-8050	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Omnitracs
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reznik, Staci F <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-1871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STV Infrastructure PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-2393	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sandarusi, Kamal <hr/> Contributor address; City; State; Zip Code  Katy, TX 77450-4376	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/46 Rpt: 38/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Byron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Addison, TX 75001	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Big Thought
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Satawake, Bob <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-5101	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schultz, Jaynie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3263	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) City Council		Employer (See Instructions) City of Dallas
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/46 Rpt: 39/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shouse, Corbin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77379-6792	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shouse, Corbin <hr/> Contributor address; City; State; Zip Code  Spring, TX 77379-6792	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shuttee, Anne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-1831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) attorney-mediator		Employer (See Instructions) self
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sigler, Tim <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3416	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siler, Grace <hr/> Contributor address; City; State; Zip Code  Henderson, TX 75654	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/46 Rpt: 40/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singer, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248-2961	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smiedt, Evan <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92130-6844	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) The Fundworks LLC
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Suzanne <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1378	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Social Impact Architects
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Solomon, Christopher <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-4144	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) SAM Companies
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southern, Pam <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6803	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/46 Rpt: 41/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southern, Pam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-6803	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stevens, Christa <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-3825	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) State Government Affairs/ Lobbyist		Employer (See Instructions) Autism Speaks
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suffness, Dorit <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4246	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suffness, Dorit <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4246	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sukkar, Claris <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3550	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Sukkar Management LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/46 Rpt: 42/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	<b>7</b> Amount of Contribution (\$)  \$10.53
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/16/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00361758</u> ) T-Mobile Political Action Committee <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004-2665	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Talkington, Kyle Chapman <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4431	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Robert Half International
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00564807</u> ) Taylor Morrison Inc. Building Strong Business PAC <hr/> Contributor address; City; State; Zip Code  Scottsdale, AZ 85251-7656	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Tom <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/46 Rpt: 43/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Health Plans PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-5002	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Automobile Dealers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2181	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Construction Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1905	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Dental Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3644	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Farm Bureau Agfund Inc. <hr/> Contributor address; City; State; Zip Code  Waco, TX 76702-2689	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/46 Rpt: 44/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Food & Fuel Assn. - PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-1671	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Medical Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1624	Amount of Contribution (\$)  \$20,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Optometric PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2004	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Property Tax Leinholders Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1724	Amount of Contribution (\$)  \$3,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas REALTORS Political Action Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-2246	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/46 Rpt: 45/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas REALTORS Political Action Committee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768-2246	<b>7</b> Amount of Contribution (\$)  \$15,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Restaurant Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78767-1429	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Society of Anesthesiologists PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1665	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Association Of Fire Fighters PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2170	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Teachers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-8327	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/46 Rpt: 46/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Political Action Committee of the Texas Hospital Association <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2180	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Real Estate Council PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201-1104	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Jane <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-1639	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/16/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00542365</u> ) Toyota Motor North America PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004-2801	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Andy <hr/> Contributor address; City; State; Zip Code  Colleyville, TX 76034-5758	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) GCISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/46 Rpt: 47/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) US Anesthesia Partners - Texas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75251-2237	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valero Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78269-6000	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Ort, Molly Nelson <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-5016	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vogel, Jonathan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1806	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Knox Dental
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/46 Rpt: 48/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wallace, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75038-6436	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) President/CEO		<b>9</b> Employer (See Instructions) North Texas Commission
<b>Date</b> 02/19/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walne, Walter Alan <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75238-2129	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> Bottom Line Consultants
<b>Date</b> 02/05/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walter, Paula <hr/> <b>Contributor address; City; State; Zip Code</b>  Tucson, AZ 85712-5467	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 02/18/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watson, Lesta <hr/> <b>Contributor address; City; State; Zip Code</b>  Grand Prairie, TX 75050-1303	<b>Amount of Contribution (\$)</b>  \$2.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 01/31/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wentzel, Lisa <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75231-4837	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Marketing		<b>Employer (See Instructions)</b> Plexon Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/46 Rpt: 49/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willbanks, Tom <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-1370	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Kendra Lee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-7343	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UTSW
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilmoth, Robert <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-3242	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Farrow-Gillespie Heath Wilmoth LLP
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolovits, Ann <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-5443	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/46 Rpt: 50/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wren, Pamela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080-6026	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 01/29/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) de la Vega, Benny <hr/> <b>Contributor address; City; State; Zip Code</b>  Farmers Branch, TX 75234-2221	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 01/30/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) zum Felde, Monica <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75214-4133	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/4 Rpt: 51/83	
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/01/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	8 Amount of contribution (\$) \$1,400.00	9 In-kind contribution description Campaign signs
	7 Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	Amount of contribution (\$) \$1,357.82	In-kind contribution description Campaign event venue and catering
	Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	Amount of contribution (\$) \$75.86	In-kind contribution description Campaign signs
	Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 2/4 Rpt: 52/83	
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/16/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	8 Amount of contribution (\$) \$164.11	9 In-kind contribution description Campaign signs
	7 Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	Amount of contribution (\$) \$135.31	In-kind contribution description Push cards
	Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	Amount of contribution (\$) \$3.03	In-kind contribution description Digital advertising
	Contributor address; City; State; Zip Code  Irving, TX 75017-1057		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 3/4 Rpt: 53/83	
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/23/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Professional Fire Fighters PAC	8 Amount of contribution (\$) \$16.38	9 In-kind contribution description Digital advertising
	7 Contributor address; City; State; Zip Code  Irving, TX 75017-1057	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC	Amount of contribution (\$) \$306.04	In-kind contribution description Event food and beverage
	Contributor address; City; State; Zip Code  Austin, TX 78746-5776	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau Agfund Inc.	Amount of contribution (\$) \$5.75	In-kind contribution description Website endorsement
	Contributor address; City; State; Zip Code  Waco, TX 76702-2689	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 4/4 Rpt: 54/83	
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 02/09/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas REALTORS Political Action Committee	<b>8</b> Amount of contribution (\$) \$30,893.79	<b>9</b> In-kind contribution description Direct Mail
	<b>7</b> Contributor address; City; State; Zip Code  Austin, TX 78768-2246	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/27 Rpt: 55/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Payee name 4Imprint	
<b>6</b> Amount (\$) \$523.06	<b>7</b> Payee address; City; State; Zip Code 101 Commerce St  Oshkosh, WI 54901-4864	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials printing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2024	Payee name ActBlue	
Amount (\$) \$843.11	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 1/26/24 - 2/24/24
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Allen, Brenda	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/27 Rpt: 56/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Allen, Brenda	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Berlin Rosen	
Amount (\$) \$30,925.44	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Berlin Rosen	
Amount (\$) \$32,379.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/27 Rpt: 57/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/01/2024	<b>5</b> Payee name Berlin Rosen
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<b>6</b> Amount (\$) \$8,238.08	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/01/2024	Payee name Berlin Rosen
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Amount (\$) \$30,925.44	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/07/2024	Payee name Berlin Rosen
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Amount (\$) \$32,214.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/27 Rpt: 58/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/07/2024	<b>5</b> Payee name Berlin Rosen	
<b>6</b> Amount (\$) \$20,533.00	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2024	Payee name Berlin Rosen	
Amount (\$) \$11,824.68	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2024	Payee name Berlin Rosen	
Amount (\$) \$20,533.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/27 Rpt: 59/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/14/2024	<b>5</b> Payee name Berlin Rosen
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<b>6</b> Amount (\$) \$6,150.00	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video production services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/14/2024	Payee name Berlin Rosen
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Amount (\$) \$6,150.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video production services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/14/2024	Payee name Berlin Rosen
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Amount (\$) \$6,194.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video production services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/27 Rpt: 60/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/15/2024	<b>5</b> Payee name Berlin Rosen	
<b>6</b> Amount (\$) \$8,238.08	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Mail
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/19/2024	Payee name Berlin Rosen	
Amount (\$) \$33,932.08	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Mail
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	
Date 02/21/2024	Payee name Berlin Rosen	
Amount (\$) \$12,662.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/27 Rpt: 61/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Berlin Rosen	
<b>6</b> Amount (\$) \$37,032.38	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/22/2024	Payee name Berlin Rosen	
Amount (\$) \$8,300.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video production services
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/02/2024	Payee name Campaignly Group LLC	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign digital communications consulting
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/27 Rpt: 62/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Campaignly Group LLC	
<b>6</b> Amount (\$) \$7,000.00	<b>7</b> Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign digital communications consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Clark, Ernest	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2024	Payee name Clark, Ernest	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 9/27 Rpt: 63/83	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605	
<b>4</b>	Date 02/16/2024	<b>5</b>	Payee name Cobb, Lauren			
<b>6</b>	Amount (\$) \$136.68	<b>7</b>	Payee address; City; State; Zip Code 2401 San Gabriel St Apt 416 Austin, TX 78705-4734			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 02/17/2024		Payee name Cobb, Lauren			
	Amount (\$) \$136.68		Payee address; City; State; Zip Code 2401 San Gabriel St Apt 416 Austin, TX 78705-4734			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 02/22/2024		Payee name Constant Contact			
	Amount (\$) \$580.97		Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451-7333			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email distribution service			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/27 Rpt: 64/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/15/2024	<b>5</b> Payee name Costco
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<b>6</b> Amount (\$) \$268.90	<b>7</b> Payee address; City; State; Zip Code 8055 Churchill Way  Dallas, TX 75251-2149
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Snacks and supplies for district office
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/30/2024	Payee name Dalton, Hans
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Amount (\$) \$350.00	Payee address; City; State; Zip Code 8552 Royal County Down Dr  Mckinney, TX 75070-1679
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign distribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name Diaz, Alvaro
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 2405 Montopolis Dr Apt 2224 Austin, TX 78741-6426
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/27 Rpt: 65/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/13/2024	<b>5</b> Payee name Edwards & Patterson Signs
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<b>6</b> Amount (\$) \$817.56	<b>7</b> Payee address; City; State; Zip Code 203 S Belt Line Rd  Irving, TX 75060-2158
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign t-shirts
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/13/2024	Payee name Edwards & Patterson Signs
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Amount (\$) \$1,301.71	Payee address; City; State; Zip Code 203 S Belt Line Rd  Irving, TX 75060-2158
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign yard signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name England, Rudy
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 1219 S Lamar Blvd Apt 307 Austin, TX 78704-2371
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/27 Rpt: 66/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/16/2024	<b>5</b> Payee name England, Rudy
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<b>6</b> Amount (\$) \$143.38	<b>7</b> Payee address; City; State; Zip Code 1219 S Lamar Blvd Apt 307 Austin, TX 78704-2371
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/17/2024	Payee name England, Rudy
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Amount (\$) \$183.58	Payee address; City; State; Zip Code 1219 S Lamar Blvd Apt 307 Austin, TX 78704-2371
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/12/2024	Payee name Facebook
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, CA 94025-1456
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/27 Rpt: 67/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$900.00	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, CA 94025-1456	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/22/2024	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, CA 94025-1456	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2024	Payee name Gables Park Plaza	
Amount (\$) \$2,544.71	Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/27 Rpt: 68/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/05/2024	<b>5</b> Payee name Green Apple Lane	
<b>6</b> Amount (\$) \$1,042.00	<b>7</b> Payee address; City; State; Zip Code PO Box 662  Kennedale, TX 76060-0662	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website graphic design
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Hootsuite	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/27 Rpt: 69/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 01/31/2024	<b>5</b> Payee name Hovatter, Keely
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 5226 Basswood Ln  Austin, TX 78723-5450
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name Internal Revenue Service
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Amount (\$) \$750.75	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/08/2024	Payee name Internal Revenue Service
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Amount (\$) \$247.50	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/27 Rpt: 70/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Johnson, Nathan M	
<b>6</b> Amount (\$) \$434.00	<b>7</b> Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Lappinga, Lani	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2024	Payee name Lappinga, Lani	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/27 Rpt: 71/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 01/27/2024	<b>5</b> Payee name Lappinga, Lani	
<b>6</b> Amount (\$) \$278.05	<b>7</b> Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Lappinga, Lani	
Amount (\$) \$139.36	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2024	Payee name Lappinga, Lani	
Amount (\$) \$138.02	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/27 Rpt: 72/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Las Colinas Country Club	
<b>6</b> Amount (\$) \$1,080.01	<b>7</b> Payee address; City; State; Zip Code 904 Lane St  Irving, TX 75061-2340	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meet and greet venue and catering
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Martin, Colleen	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 7805 La Manga Dr  Dallas, TX 75248-3132	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mobilize software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/27 Rpt: 73/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/05/2024	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$345.32	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Nguyen, Codi Vinh-Hien	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 8701 W Parmer Ln Apt 1123 Austin, TX 78729-4942	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2024	Payee name North Dallas Gazette	
Amount (\$) \$1,635.00	Payee address; City; State; Zip Code 1425 W Pioneer Dr Ste 123 Irving, TX 75061-7124	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/27 Rpt: 74/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Peerly Inc.	
<b>6</b> Amount (\$) \$9,600.00	<b>7</b> Payee address; City; State; Zip Code 2232 Dell Range Blvd Ste 287 Cheyenne, WY 82009-4941	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign texting service
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name Preston Hollow Democrats	
Amount (\$) \$335.00	Payee address; City; State; Zip Code PO Box 670631  Dallas, TX 75367-0631	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Public Policy Polling	
Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 2900 Highwoods Blvd Ste 201 Raleigh, NC 27604-1036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/27 Rpt: 75/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Public Policy Polling	
<b>6</b> Amount (\$) \$8,000.00	<b>7</b> Payee address; City; State; Zip Code 2900 Highwoods Blvd Ste 201 Raleigh, NC 27604-1036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Rayo, Rose Marie	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6831 Toland St  Dallas, TX 75227-3762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2024	Payee name Reilly Echols Printing	
Amount (\$) \$518.72	Payee address; City; State; Zip Code 1710 S Harwood St  Dallas, TX 75215-1221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign post cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/27 Rpt: 76/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/14/2024	<b>5</b> Payee name Reilly Echols Printing
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<b>6</b> Amount (\$) \$253.31	<b>7</b> Payee address; City; State; Zip Code 1710 S Harwood St  Dallas, TX 75215-1221
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business cards
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/23/2024	Payee name Reilly Echols Printing
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Amount (\$) \$1,515.50	Payee address; City; State; Zip Code 1710 S Harwood St  Dallas, TX 75215-1221
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign doorhangers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/23/2024	Payee name Reilly Echols Printing
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Amount (\$) \$351.81	Payee address; City; State; Zip Code 1710 S Harwood St  Dallas, TX 75215-1221
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/27 Rpt: 77/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/15/2024	<b>5</b> Payee name Renfroe, Rose	
<b>6</b> Amount (\$) \$4,000.00	<b>7</b> Payee address; City; State; Zip Code 602 Linkcrest Dr  Duncanville, TX 75137-3914	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign distribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Rideshare 2 Vote Aware	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 801034  Dallas, TX 75380-1034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Program contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2024	Payee name Slovic, Spencer	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3902 De Longpre Ave  Los Angeles, CA 90027-4732	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign digital consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/27 Rpt: 78/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Texas Justice Democrats PAC	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 6333 E Mockingbird Ln Ste 147 Dallas, TX 75214-2672	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2024	Payee name Texas Senate Hispanic Caucus	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code PO Box 684754  Austin, TX 78768-4754	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Caucus Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Texas Workforce Commission	
Amount (\$) \$254.80	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/27 Rpt: 79/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/08/2024	<b>5</b> Payee name Texas Workforce Commission
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<b>6</b> Amount (\$) \$84.00	<b>7</b> Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/09/2024	Payee name The Sheriff's Community Partnership
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 133 N Riverfront Blvd # LB31 Dallas, TX 75207-4300
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gun Buy Back Program donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/05/2024	Payee name The Tyson Organization
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Amount (\$) \$30,000.00	Payee address; City; State; Zip Code 1351 Mistletoe Dr  Fort Worth, TX 76110-1022
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phone calls
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/27 Rpt: 80/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/20/2024	<b>5</b> Payee name Vector Brewing
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<b>6</b> Amount (\$) \$338.48	<b>7</b> Payee address; City; State; Zip Code 9850 Walnut Hill Ln # 405 Dallas, TX 75238-2012
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal with staff in Dallas
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name Westin
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Amount (\$) \$148.32	Payee address; City; State; Zip Code 12720 Merit Dr  Dallas, TX 75251-1206
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for staff in Dallas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name Westin
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Amount (\$) \$125.59	Payee address; City; State; Zip Code 12720 Merit Dr  Dallas, TX 75251-1206
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for staff in Dallas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/27 Rpt: 81/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/20/2024	<b>5</b> Payee name Westin
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<b>6</b> Amount (\$) \$125.59	<b>7</b> Payee address; City; State; Zip Code 12720 Merit Dr  Dallas, TX 75251-1206
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for staff in Dallas
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name Westin
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Amount (\$) \$296.64	Payee address; City; State; Zip Code 12720 Merit Dr  Dallas, TX 75251-1206
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for staff in Dallas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 82/83	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
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<b>4</b> Date 02/14/2024	<b>5</b> Payee name Hyatt Regency Dallas
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<b>6</b> Amount (\$) \$5.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 300 Reunion Blvd E  Dallas, TX 75207-4409
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet parking at event
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/15/2024	Payee name Westin Dallas
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Amount (\$) \$5.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1201 Main St  Dallas, TX 75202-3908
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet parking at event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 83/83
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 02/01/2024	<b>5</b> Name of person from whom amount is received Berlin Rosen	<b>8</b> Amount (\$) \$5,038.56
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  New York, NY 10038	
	<b>7</b> Purpose for which amount is received Postage refund	<input type="checkbox"/> Check if political contribution returned to filer