FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 74 00015622 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Optometric PAC Date Received **ELECTRONICALLY FILED** 04/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3011 N. Lamar Ste 300 Change of Address Austin, TX 78705 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Brenda J. NAME Date Processed NICKNAME **SUFFIX** LAST BJ Date Imaged Avery CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 3011 N. Lamar STREET **ADDRESS** Ste 300 (Residence or Business) Austin, TX 78705 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 707-2020 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 X April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 02/26/2024 03/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			•		
L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Optometric PAC				00015622	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported			
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
L5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OPOLITICAL CONTRIBUT OR GUARANTEES OF LO ADE ELECTRONICALLY) qualifies for the higher itemiza	ANS, OR	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIONS		\$	29,553.69
	`	OGES, LOANS, OR GUAR	<u> </u>		20,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEL	POLITICAL EXPENDITU	RES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	18,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTA G PERIOD	NINED AS OF THE LAST	DAY \$	411,482.00
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTA	ANDING LOANS AS OF 1	THE \$	0.00
.6 AFFIDAVIT	I			<u> </u>	
		true and cor	offirm, under penalty of perect and includes all informations.5, Election Code.	rjury, that the a	accompanying report is d to be reported by me
			Ms Brend	da J. Avery	
			Signature of Ca		urer
AFFIX NOTARY	STAMP / SEAL ABOVE		-		
Sworn to and subscribed	hoforo mo, by the said		+1	nis tho	day
		vhich, witness my hand an			uay
<u> </u>	, 20, to coruly t	which, whiless my halid an	a scar or office.		
Signature of officer add	ministering oath	Printed name of officer ad	ministering oath	Title of office	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			3 of 74
17 COMMITTEE NAME Texas Optometric PAC		18 Filer ID 00015622	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTION	S		\$ 29,553.69
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL (CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CCOORGANIZATION	DRPORATION OR LABO	R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUT LABOR ORGANIZATION	TIONS FROM CORPORA	TION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORA	ATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM COR ORGANIZATION	RPORATION OR LABOR		\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORF	PORATION OR LABOR (DRGANIZATION	\$
9. SCHEDULE E: LOANS			\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLI	TICAL CONTRIBUTIONS	6	\$ 18,000.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM PO	OLITICAL CONTRIBUTIO	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CAR	D		\$
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM PO	OLITICAL CONTRIBUTIO	ONS	\$ 11,485.54
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, A	AND CONTRIBUTIONS F	RETURNED	\$

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 1/64 Rpt: 4/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	Acosta O.D., Celeste	t-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_		Helotes, TX 78023					
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions))		
	Date 03/15/2024	Full name of contributor out Alexander O.D., Lindsey Contributor address; City; State; Zig)		Amount of Contribution (\$)	\$100.00
	Principal occu	Sunnyvale, TX 75182 pation / Job title (See Instructions)		Employer (See Instructions			
	Optometrist	oation / Job title (See instructions)		Employer (See instructions	,		
	Date 03/15/2024	Full name of contributor out Ali O.D., Mohsan Contributor address; City; State; Zip	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20
	Driverinal con-	Pearland, TX 77584		Franks on (Cas Instructions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	,		
	Date 03/15/2024	Allen O.D., Mark Contributor address; City; State; Zip	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Atlanta, TX 75551 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out Allison O.D., Joseph Contributor address; City; State; Zip	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 2/64 Rpt: 5/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (IE Altig O.D., William Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$400.00
_	Deireirel	Fort Worth, TX 76137	le Fundame (Contrata di			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Amador O.D., Nancy Contributor address; City; State; Zip Code)#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Optometrist			-,		
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Amin O.D., Opal Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78730				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Amir O.D., Nancy Contributor address; City; State; Zip Code San Antonio, TX 78240)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Anderson O.D., Vanessa Contributor address; City; State; Zip Code Amarillo, TX 79109			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/64 Rpt: 6/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	5	Fort Worth, TX 76008	10 5 1 10 11 11	<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Arora O.D., Rajan Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$50.00
		Dallas, TX 75227	1 - 1 (0 1 1 1	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Arroyo O.D., Julio Contributor address; City; State; Zip Code	±)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77076				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Arya O.D., Dimple Contributor address; City; State; Zip Code Sugar Land, TX 77479	<u>; </u>	•	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Aston II O.D., William Contributor address; City; State; Zip Code Ft Worth, TX 76179			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/64 Rpt: 7/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$47.76
_		Conroe, TX 77301		_		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Delicalisation	Mission, TX 78572	Formula van (Oa a la atmustia a	$\overline{\Gamma}$		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Mission, TX 78572				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	•					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/64 Rpt: 8/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$30.00
_		Killeen, TX 76542	1			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Bashover O.D., Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringinal acqu	Arlington, TX 76011	Employer (See Instructions	·/-		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Bate O.D., Joy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Haslet, TX 76052				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Bernay O.D., Deborah Contributor address; City; State; Zip Code La Porte, TX 77571)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Bhaga O.D., Sheetal Contributor address; City; State; Zip Code Frisco, TX 75036			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/64 Rpt: 9/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (ID#:_Blount O.D., Brian Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$208.00
_	<u> </u>	Beaumont, TX 77706		_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Bock O.D., Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Principal occu	Houston, TX 77063 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Brantley O.D., Todd Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Plano, TX 75024				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Brending O.D., Gabrielle Contributor address; City; State; Zip Code Seabrook, TX 77586)		Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Brinegar O.D., Vaughn Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIE	BUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 7/64 Rpt: 10/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state Brochetti O.D., Brenda Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.20
		Plano, TX 75075					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 03/15/2024	Full name of contributor out-of-state Broussard O.D., Wendy Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringing agg	Beaumont, TX 77701	<u> </u>	Employer (See Instructions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state Brown O.D., Corwin Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76003					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Brownlee O.D., Chris	PAC (ID#:)		Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Bui O.D., Thoai Contributor address; City; State; Zip Code Carrollton, TX 75007				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 8/64 Rpt: 11/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (ID#:_Bullard O.D., Heath Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Burket O.D., Caitlin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.20
	Principal occu	Harlingen, TX 78552 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Optometrist	sation, oop title (occ manactions)	Employer (See morractions	')		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Butler O.D., W Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Round Rock, TX 78681				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Campbell O.D., Megan Contributor address; City; State; Zip Code Celina, TX 75009			Amount of Contribution (\$)	\$26.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Campbell O.D., Steven Contributor address; City; State; Zip Code San Antonio, TX 78212			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 9/64 Rpt: 12/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state Cargo O.D., Jon Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$200.00
_		Irving, TX 75063	la la				
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 03/15/2024	Castleberry O.D., Kim)		Amount of Contribution (\$)	\$400.00
	Deinsinal assu	Plano, TX 75024		Franks on (Cas Instructions	_		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Cerda O.D., Juan Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		McAllen, TX 78501					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u>;</u>)		
	Date 03/15/2024	Chang O.D., Sarah				Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 03/15/2024	Full name of contributor out-of-state Chen O.D., Alexander Contributor address; City; State; Zip Code Houston, TX 77004)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	()		
			l				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/64 Rpt: 13/74	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00
_	<u> </u>	Ft Worth, TX 76137				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cheyne O.D., Chris Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$192.53
		Granbury, TX 76049				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cheyne O.D., Chris Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$192.53
		Granbury, TX 76049				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Chu O.D., Victoria Contributor address; City; State; Zip Code Austin, TX 78745)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cobb O.D., James Contributor address; City; State; Zip Code Amarillo, TX 79107			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 11/64 Rpt: 14/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Arlington, TX 76013				
8	Principal occu Optometrist	oation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Colton O.D., Bruce Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Murphy, TX 75094 pation / Job title (See Instructions)	Employer (See Instruction			
	Optometrist	oalion / Job title (See instructions)	Employer (See instruction	15)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Conley O.D., Alex Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76131				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	is)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Conroy O.D., Scott Contributor address; City; State; Zip Code Pasadena, TX 77505	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Consor O.D., Bob Contributor address; City; State; Zip Code Dallas, TX 75252	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ns)		
			1			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/64 Rpt: 15/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$104.00
8	Principal occu	N. Richland Hills, TX 76180 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Optometrist	oalion / Job title (See instructions)	e Employer (See Instructions	')		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cooke O.D., Kyle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Mansfield, TX 76063				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cornett O.D., John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Amarillo, TX 79109				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Correale O.D., Suzanne Contributor address; City; State; Zip Code Alvin, TX 77511			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cowan O.D., Steve Contributor address; City; State; Zip Code Amarillo, TX 79109			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/64 Rpt: 16/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_	<u> </u>	Atlanta, TX 75551	Ja 5 1 (0 1 1 1	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Crothers O.D., Frank Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Austin, TX 78750	Employer (Co.s. In ohr vetices	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Crowell O.D., Courtney Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76107				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Culbertson O.D., Wayne Contributor address; City; State; Zip Code Dallas, TX 75225	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID: Cummings O.D., Kory Contributor address; City; State; Zip Code Fort Worth, TX 76107	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 14/64 Rpt: 17/74
2	FILER NAME Texas Optor	netric PAC		3 Filer ID (Ethics Commission Filers) 00015622
4	Date 03/15/2024	 Full name of contributor	C (ID#:)	7 Amount of Contribution (\$) \$200.00
		Frisco, TX 75034		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ons)
	Date 03/15/2024	Full name of contributor out-of-state PA Dabney O.D., Brandon Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$)
	Dringing agg	Amarillo, TX 79102	Employer (See Instruction	2000)
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ліз)
	Date 03/15/2024	Full name of contributor	C (ID#:)	Amount of Contribution (\$)
		Houston, TX 77007		
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ons)
	Date 03/15/2024	Full name of contributor out-of-state PADao O.D., Mavis Contributor address; City; State; Zip Code Pearland, TX 77584	C (ID#:)	Amount of Contribution (\$) \$20.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ons)
	Date 03/15/2024	Full name of contributor out-of-state PADavid O.D., Ashley Contributor address; City; State; Zip Code San Angelo, TX 76904	C (ID#:)	Amount of Contribution (\$) \$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ons)
			'	

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 15/64 Rpt: 18/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state Davis O.D., Mark Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78259					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 03/15/2024	Dawn O.D., Rakich	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Dringing aggr	San Antonio, TX 78215	1	Employer (See Instructions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state Day, Jr O.D., Bob Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Garland, TX 75041					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	DeLoach O.D., Joe	PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state DeMaggio O.D., Julie Contributor address; City; State; Zip Code Cedar Park, TX 78613	PAC (ID#:			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRI	IBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to compl	ete this for	m.	1	Total pages Schedule A1: Sch: 16/64 Rpt: 19/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-star out-o)	7	Amount of Contribution (\$)	\$50.00
_	Deinsinal	Garland, TX 75042	lo.		$\overline{\Gamma}$		
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Deakins O.D., Jennifer Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Fort Worth, TX 76135					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Delay O.D., Richard Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		Boerne, TX 78015					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Delk O.D., Kyle				Amount of Contribution (\$)	\$25.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Dennis O.D., Keith)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/64 Rpt: 20/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$96.02
_	Deireirel	Edinburg, TX 78541	2 Faralassa (Caralastastica			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Dinh O.D., David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Deinsinal	Dallas, TX 75206	Faralassa (Ossalastastisas	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Dolce O.D., Jackson Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.20
	Deinsinal	Port Neches, TX 77651	Frankrije (Ozakastinski sa	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Dunnigan O.D., Shawn Contributor address; City; State; Zip Code Lumberton, TX 77657			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Duong O.D., Nghiem Contributor address; City; State; Zip Code Richardson, TX 75080			Amount of Contribution (\$)	\$75.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 18/64 Rpt: 21/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor	,	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77056 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Optometrist 0	oation / Job title (See instructions)	9 Employer (See instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Ellis O.D., John Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		El Paso, TX 79902	_			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Ellisor O.D., Glenn Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$416.00
		Humble, TX 77346				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Ermis O.D., Keith Contributor address; City; State; Zip Code Wharton, TX 77488	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Eylar O.D., Crystal Contributor address; City; State; Zip Code Allen, TX 75002	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 19/64 Rpt: 22/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$52.00
_	<u> </u>	Abilene, TX 79601	la = 1 (0 1 1 1	<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Fandry O.D., Ellen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		seabrook, TX 77586				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Feeser O.D., Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
		Huntingtown, MD 20639				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Fleitman O.D., Cynthia Contributor address; City; State; Zip Code Gainesville, TX 76240		•	Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Flores O.D., Amador Contributor address; City; State; Zip Code Laredo, TX 78041			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this for	n.	1	Total pages Schedule A1: Sch: 20/64 Rpt: 23/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_		Helotes, TX 78023	1-				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor				Amount of Contribution (\$)	\$20.20
	Principal occu	Plano, TX 75093		Employer (See Instructions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$100.00
		San Angelo, TX 76904					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Garza O.D., Janet	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 21/64 Rpt: 24/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
_	Delicalization	Missouri City, TX 77459	In Familia (Contrata de la Contrata	$\overline{\Gamma}$		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Gibson O.D., David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Lubbock, TX 79423				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Gibson O.D., David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Lubbock, TX 79423				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Gonzalez O.D., Jaime Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Graham Hayter O.D., Paul Contributor address; City; State; Zip Code Irving, TX 75063			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			I			

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 22/64 Rpt: 25/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (I Gray O.D., David Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_	Deinsinal assu	Midland, TX 79705	O Frankrian (Cook lastination			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (I Gray O.D., Jeannie Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Midland, TX 79705				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (I Greeman III O.D., Nelson Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78212				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (I Greeman O.D., Kevin Contributor address; City; State; Zip Code San Antonio, TX 78212	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (I Green O.D., Leigh Contributor address; City; State; Zip Code Woodway, TX 76712	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 23/64 Rpt: 26/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	Delicalization	College Station, TX 77845	In Frankrick (October 1981)	$\overline{\Gamma}$		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Greenstein O.D., Karena Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$47.76
	Dringing age	Dallas, TX 75216	Employer (Con Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Hall O.D., Jamie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
		Wills Point, TX 75169				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Hammond O.D., Eric Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Hanson O.D., Mark Contributor address; City; State; Zip Code Arlington, TX 76012			Amount of Contribution (\$)	\$96.02
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	te this for	m.	1	Total pages Schedule A1: Sch: 24/64 Rpt: 27/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state Harper O.D., Ellener Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.20
_	Deinsinal	Fort Worth, TX 76131		Faralassa (Ossalassassissas			
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 03/15/2024	Hart O.D., Peggy	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu	Houston, TX 77079 pation / Job title (See Instructions)		Employer (See Instructions) 		
	Optometrist			p.oyo. (000o. 00.0	,		
	Date 03/15/2024	Full name of contributor out-of-state Hartman O.D., Amy Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$52.00
		Victoria, TX 77904					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state Harvey O.D., Cameo Contributor address; City; State; Zip Code Abilene, TX 79605	,			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Hawari O.D., Andy Contributor address; City; State; Zip Code Mineola, TX 75773)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 25/64 Rpt: 28/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	5	Amarillo, TX 79109		<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Heeg O.D., Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Coppell, TX 75019				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hejny O.D., Whitney Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Miles, TX 76861				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Helbert-Green O.D., Carolyn Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Henry O.D., Amy Contributor address; City; State; Zip Code Victoria, TX 77904			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	this form.	1	ages Schedule A1: 6/64 Rpt: 29/74	
2	FILER NAME Texas Optor	netric PAC		3 Filer ID 000156	(Ethics Commission 622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC Hoang O.D., Bao Contributor address; City; State; Zip Code 		7 Amount	of Contribution (\$)	\$50.00
_	Deinsinal assu	Katy, TX 77494	O Frankria (Con lastication			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Hoang O.D., Kathy Contributor address; City; State; Zip Code	C (ID#:)	Amount	of Contribution (\$)	\$50.00
	Dringinal occu	Katy, TX 77494 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	oation / Job title (See Instructions)	Employer (See instructions	15)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Hopping O.D., Desiree Contributor address; City; State; Zip Code	C (ID#:)	Amount 	of Contribution (\$)	\$50.00
		Friendswood, TX 77546				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Hopping O.D., Ron Contributor address; City; State; Zip Code Friendswood, TX 77546	C (ID#:)	Amount	of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Hutchins O.D., Jaclyn Contributor address; City; State; Zip Code San Antonio, TX 78257	C (ID#:)	Amount	of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	is)		
			1			

	MONET	ARY POLITICAL CONTI	RIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this form.	1	Total pages Schedule A1: Sch: 27/64 Rpt: 30/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of- Huynh O.D., Hieu Contributor address; City; State; Zip Contributor) 7	Amount of Contribution (\$)	\$50.00
_	Deinsinal	Dallas, TX 75240	lo Farales	- (Cook landwations)		
8	Optometrist	pation / Job title (See Instructions)	9 Employ	er (See Instructions)		
	Date 03/15/2024	Johle O.D., Sarah	otate PAC (ID#:		Amount of Contribution (\$)	\$50.00
		Hutto, TX 78634	<u> </u>			
	Optometrist	pation / Job title (See Instructions)	Employ	er (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of- Johnson O.D., Murray Contributor address; City; State; Zip Co	state PAC (ID#:		Amount of Contribution (\$)	\$400.00
		Dallas, TX 75287				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employ	er (See Instructions)		
	Date 03/15/2024	Jolivette O.D., Nia	state PAC (ID#:)	Amount of Contribution (\$)	\$25.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employ	er (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of- Jones O.D., Jeffrey Contributor address; City; State; Zip Co	otate PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employ	er (See Instructions)		
			•			

	MONET	ARY POLITICAL CONTRIBI	UTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this form	1.	1	Total pages Schedule A1: Sch: 28/64 Rpt: 31/74	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor	-)	7	Amount of Contribution (\$)	\$47.76
_	<u> </u>	Austin, TX 78746		5 1 (0 1 1 1			
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PA Jyothi O.D., Prashant Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$416.00
	Delicalization	Dallas, TX 75243		Frankrije (O. a. kastrostiana			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PA Karanges O.D., Gayle Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$100.00
		Arlington, TX 76005					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PA Kemp O.D., Robert Contributor address; City; State; Zip Code Houston, TX 77015-2310	,)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAKimball O.D., Leigh Contributor address; City; State; Zip Code Beaumont, TX 77706				Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIB	UTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 29/64 Rpt: 32/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_		Plano, TX 75093	T			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Ins	tructions)		
	Date 03/15/2024	Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$104.00
	Principal occu	Harker Heights, TX 76548 pation / Job title (See Instructions)	Employer (See Ins	tructions)		
	Optometrist					
	Date 03/15/2024	Full name of contributor out-of-state PA Kodukula O.D., Dipa Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$50.00
		Austin, TX 78717				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Ins	tructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAKuder O.D., Bryan Contributor address; City; State; Zip Code Carrollton, TX 75007	AC (ID#:		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Ins	tructions)		
	Date 03/15/2024	Full name of contributor out-of-state PA Kuykendall O.D., Traci Contributor address; City; State; Zip Code Cleburne, TX 76033	AC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Ins	tructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/64 Rpt: 33/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
_		The Woodlands, TX 77382	la = 1			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Lam O.D., Sean Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
	Deinsinal assu	Houston, TX 77075	Franksian (Cooksaksiana	_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Lambert O.D., Sawyer Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77008				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Larry O.D., Gunnell Contributor address; City; State; Zip Code Witchita Falls, TX 76308)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Le O.D., Anne Contributor address; City; State; Zip Code Houston, TX 77072			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 31/64 Rpt: 34/74	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 5 Full name of contributor out- Le O.D., Hoan 6 Contributor address; City; State; Zip 			7	Amount of Contribution (\$)	\$50.00
_		Spring, TX 76135					
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 03/15/2024	Le O.D., Lisa Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Missouri City, TX 77459 pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist				,		
	Date 03/15/2024	Full name of contributor out- Lemanski O.D., Sundra Contributor address; City; State; Zip	of-state PAC (ID#: Code			Amount of Contribution (\$)	\$100.00
		Austin, TX 78727					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Linh O.D., Linh	of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Lou O.D., Oliver	of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/64 Rpt: 35/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Houston, TX 77082 pation / Job title (See Instructions)	9 Employer (See Instructions	.)		
•	Optometrist	sation, 300 title (See Instituctions)	Employer (See manucuona	')		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Mai O.D., Kelly Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Cypress, TX 77433				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Maldonado O.D., Michael Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		El Paso, TX 79902				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Maldonado O.D., Nicole Contributor address; City; State; Zip Code San Antonio, TX 78249)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Martin O.D., Joe Contributor address; City; State; Zip Code Cleburne, TX 76033)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONT	RIBUTIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to cor	nplete this form.	1	Total pages Schedule A1: Sch: 33/64 Rpt: 36/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	Martin O.D., Michal	f-state PAC (ID#:Code	7	Amount of Contribution (\$)	\$50.00
_	<u> </u>	Austin, TX 78735				
8	Optometrist	oation / Job title (See Instructions)	9 Employer (See Instruc	ctions)		
	Date 03/15/2024	Full name of contributor out-on Martinez O.D., Michelle Contributor address; City; State; Zip of	f-state PAC (ID#:)	Amount of Contribution (\$)	\$100.00
	Delicalisation	Ft. Worth, TX 76244	Frankrica (Con Instrum			
	Optometrist	oation / Job title (See Instructions)	Employer (See Instruc	ctions)		
	Date 03/15/2024	Full name of contributor out-on Masters O.D., Trishna Contributor address; City; State; Zip (f-state PAC (ID#:)	Amount of Contribution (\$)	\$20.20
		Arlington, TX 76006				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)		
	Date 03/15/2024	Full name of contributor out-o McCarty O.D., Dennis Contributor address; City; State; Zip of Cedar Park, TX 78613			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)		
	Date 03/15/2024	Full name of contributor out-on McClain O.D., Christos Contributor address; City; State; Zip Contributor address; City; City; City; State; Zip Contributor address; City;	f-state PAC (ID#:)	Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)		
			'			

	MONET	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 34/64 Rpt: 37/74		
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commissio 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor out-of-state PA McCollough O.D., John Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00	
_	Dringing! aggs	Victoria, TX 77904	ام	Employer (Coo Instructions	_			
8	Optometrist	pation / Job title (See Instructions)	g	Employer (See Instructions	5)			
	Date 03/15/2024	Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$50.00	
	Principal occu	Austin, TX 78759 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)			
	Optometrist							
	Date 03/15/2024	Full name of contributor out-of-state PA McCown O.D., Joshua Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$100.00	
		Gatesville, TX 76528	_					
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PA McGowan O.D., Joseph Contributor address; City; State; Zip Code AUSTIN, TX 78748-1051				Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PA McPherson O.D., Kimberly Contributor address; City; State; Zip Code North Richland Hills, TX 76180	AC (ID#:)		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 35/64 Rpt: 38/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
_	Deinsinal assu	Huntsville, TX 77340	Construction			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (Montgomery O.D., Brandi Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Missouri City, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Optometrist	odion, oop the (See Handelons)	Employer (See Instructions	<i>J</i>)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (Moon O.D., Debra Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75024				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (Moore O.D., Tory Contributor address; City; State; Zip Code Dumas, TX 79029	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (Mora O.D., David Contributor address; City; State; Zip Code Laredo, TX 78043	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			,			

	MONET	ONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	_E A1	
	The Instruc	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 36/64 Rpt: 39/74		
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	Full name of contributor Morozco O.D., MichaelContributor address; City; State;)	7	Amount of Contribution (\$)	\$50.00	
		San Antonio, TX 78240	•					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	i)			
	Date 03/15/2024	Full name of contributor Mosbacher O.D., Diane Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00	
	Principal occu	Dallas, TX 75248 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>			
	Optometrist	sation 7 oob title (oce matractions)		Employer (See mandellons	')			
	Date 03/15/2024	Full name of contributor Mozdbar O.D., Sima Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20	
		Austin, TX 78750						
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 03/15/2024	Full name of contributor Murrell O.D., Jessica Contributor address; City; State; Spring, TX 77002	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20	
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 03/15/2024	Nailing O.D., Amy	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.20	
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)			
			'					

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 37/64 Rpt: 40/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor	,	7	Amount of Contribution (\$)	\$200.00
_		Edinburg, TX 78539		Ĺ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Newton O.D., Ronald Contributor address; City; State; Zip Code	#:)	•	Amount of Contribution (\$)	\$100.00
	Dringing! goog	Laredo, TX 78040	Employer (See Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Nguyen O.D., Hai Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Portland, TX 78374				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Nguyen O.D., Jenifer Contributor address; City; State; Zip Code Addison, TX 75001	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Nguyen O.D., Kimuyen Contributor address; City; State; Zip Code Richardson, TX 75082	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CO	S	SCHEDULE A1			
	The Instru	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 38/64 Rpt: 41/74	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	Nguyen O.D., Long	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$20.20
_	Duinning Langu	Houston, TX 77059	To.	Franks on (Cook backwastican			
8	Optometrist	pation / Job title (See Instructions)	g	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor				Amount of Contribution (\$)	\$100.00
	Dringing aggr	Houston, TX 77072		Employer (Con Instructions			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
		Dallas, TX 75224					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor Nguyen O.D., Thai-An Contributor address; City; State; 2 Dallas, TX 75206	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor Nguyen O.D., Tu Contributor address; City; State; 2 Cypress, TX 77429	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 39/64 Rpt: 42/74		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor	_	7	Amount of Contribution (\$)	\$50.00	
0	Dringing Lagge	Grand Prairie, TX 75054	C Employer (Coo Instructions	<u></u>			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Nichols O.D., Brian Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
		Mt Pleasant, TX 75455	1				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_O'Brien O.D., Erica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.00	
		Georgetown, TX 78628					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Ousley O.D., Bruce Contributor address; City; State; Zip Code Highland Village, TX 75077			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Park O.D., Jon Contributor address; City; State; Zip Code Irving, TX 75063			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
			'				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/64 Rpt: 43/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Dringing Loggy	Fort Stockton, TX 79735	O Employer (Coo Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Pass O.D., Joshua Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringing aggr	Fort Stockton, TX 79735	Employer (Coo Instructions	_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Patel O.D., Ajay Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Frisco, TX 75035				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Patel O.D., Neha Contributor address; City; State; Zip Code Fort Worth, TX 76137			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Patel O.D., Nimisha Contributor address; City; State; Zip Code Houston, TX 77027)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 41/64 Rpt: 44/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (ID# Patel O.D., Riyal Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_	Deire die alle access	Austin, TX 78704	Surface (Octobrida			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor	±:)		Amount of Contribution (\$)	\$200.00
		Beaumont, TX 77706	_			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Patrick O.D., Carey Contributor address; City; State; Zip Code	<i>t</i> :)	•	Amount of Contribution (\$)	\$200.00
		Allen, TX 75002				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Pepin O.D., Allison Contributor address; City; State; Zip Code Georgetown, TX 78628	#:)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID# Peterson O.D., Christopher Contributor address; City; State; Zip Code Carrolton, TX 75006	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			<u>'</u>			

	MONET	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to com	plete this for	n.	1	Total pages Schedule A1: Sch: 42/64 Rpt: 45/74			
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 03/15/2024	 Full name of contributor out-of-s Peterson O.D., Savannah Contributor address; City; State; Zip Co 			7	Amount of Contribution (\$)	\$26.00		
_		Webster, TX 77598							
8	Principal occu Optometrist	oation / Job title (See Instructions)	9	Employer (See Instructions)				
	Date 03/15/2024	Full name of contributor out-of-s Philip O.D., Blessy Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$20.00		
	Deireciant	Coppell, TX 75019		Faralana (Caralana tanatian					
	Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)				
	Date 03/15/2024	Full name of contributor out-of-s Phillips O.D., Jeff Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$100.00		
	Principal occu	Texarkana, TX 75503 pation / Job title (See Instructions)		Employer (See Instructions)				
	Optometrist				,				
	Date 03/15/2024	Pierce O.D., Jordan)		Amount of Contribution (\$)	\$50.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)				
	Date 03/15/2024	Pillai O.D., Anith	state PAC (ID#:			Amount of Contribution (\$)	\$100.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)				
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	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 43/64 Rpt: 46/74		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (ID#: Pollard O.D., Paige Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00	
	Dringing Loon	Midlothian, TX 76065	Employer (See Instructions				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Poole O.D., Brianne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Spicewood, TX 78669	1				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Poole O.D., Mohan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Marble Falls, TX 78654					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Prapta O.D., Shawn Contributor address; City; State; Zip Code Mansfield, TX 76063)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Prapta O.D., Shawn Contributor address; City; State; Zip Code Mansfield, TX 76063			Amount of Contribution (\$)	\$104.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()			

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 44/64 Rpt: 47/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor out-of-state PAC (ID Prati O.D., Martin Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
	Dringing Loggy	Houston, TX 77058	C Employer (See Instruction	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Preston O.D., Kerry Contributor address; City; State; Zip Code) #:)		Amount of Contribution (\$)	\$100.00
		Abilene, TX 79606	1	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Proske O.D., Paul Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Spring, TX 77379				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Proske O.D., Paul Contributor address; City; State; Zip Code Spring, TX 77379)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Pulpan O.D., Stephanie Contributor address; City; State; Zip Code Perryton, TX 79070)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 45/64 Rpt: 48/74		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00	
0	Dringing agg	Georgetown, TX 78628	Employer (See Instructions	_			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 03/15/2024	Full name of contributor			Amount of Contribution (\$)	\$104.00	
		New Braunfels, TX 78132					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Ramirez O.D., Angie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		Pharr, TX 78582					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Ramirez O.D., Antonio Contributor address; City; State; Zip Code McAllen, TX 78504			Amount of Contribution (\$)	\$96.02	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Ramirez O.D., Kirsti Contributor address; City; State; Zip Code San Antonio, TX 78233			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/64 Rpt: 49/74			
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00		
_		San Antonio, TX 78232	<u> </u>					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)				
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Ratcliff O.D., Reagan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00		
		Friendswood, TX 77546						
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)				
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Reneau O.D., Aaron Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Kingwood, TX 77345						
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)				
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Reynolds O.D., Samantha Contributor address; City; State; Zip Code Haslet, TX 76052)		Amount of Contribution (\$)	\$52.00		
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Robertson O.D., Reid Contributor address; City; State; Zip Code Allen, TX 75013			Amount of Contribution (\$)	\$50.00		
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)				
			ı					

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/64 Rpt: 50/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
0	Dringing occu	Allen, TX 75013	Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson O.D., Beth Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Friendswood, TX 77546				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Robinson O.D., Nathaniel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Lufkin, TX 75904				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Rojas O.D., Luis Contributor address; City; State; Zip Code Dallas, TX 75204)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Rosemore O.D., Corey Contributor address; City; State; Zip Code Frisco, TX 75035)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 48/64 Rpt: 51/74		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00	
_		Frisco, TX 75033					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Salchak O.D., Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Sugarland, TX 77479					
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Sandberg O.D., Kyle Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		San Antonio, TX 78229					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Sappington O.D., Amanda Contributor address; City; State; Zip Code Amarillo, TX 79119			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Sawhney O.D., Dimple Contributor address; City; State; Zip Code Austin, TX 78723)		Amount of Contribution (\$)	\$96.02	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)			

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 49/64 Rpt: 52/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		College Station, TX 77840		Ļ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Segu O.D., Pat Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Missouri City, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions	ls)		
	Optometrist	,		, 		
	Date 03/15/2024	Full name of contributor out-of-state PAC Shandley O.D., Brian Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$400.00
		Lake Jackson, TX 77566				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Shannon O.D., Bridget Contributor address; City; State; Zip Code Frisco, TX 75035	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Shauger O.D., Susan Contributor address; City; State; Zip Code Austin, TX 78727	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 50/64 Rpt: 53/74		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor out-of-state PA Shidlofsky O.D., Charles Contributor address; City; State; Zip Code 	C (ID#:	7	Amount of Contribution (\$)	\$50.00	
		Plano, TX 75024					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)			
	Date 03/15/2024	Full name of contributor out-of-state PA Sianghio O.D., Leyden Contributor address; City; State; Zip Code	C (ID#:		Amount of Contribution (\$)	\$20.20	
	Principal occu	San Antonio, TX 78255 pation / Job title (See Instructions)	Employer (See Instruc	rtions)			
	Optometrist	outon 7 300 title (See instituctions)	Employer (See Institut	20013)			
	Date 03/15/2024	Full name of contributor out-of-state PA Sitterle O.D., Scott Contributor address; City; State; Zip Code	C (ID#:		Amount of Contribution (\$)	\$100.00	
		San Antonio, TX 78247	1				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)			
	Date 03/15/2024	Full name of contributor out-of-state PA Slaughter O.D., Kim Contributor address; City; State; Zip Code Georgetown, TX 78628	C (ID#:		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)			
	Date 03/15/2024	Full name of contributor out-of-state PA Smith O.D., Cameron Contributor address; City; State; Zip Code Mansfield, TX 76063	IC (ID#:)	Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruc	ctions)			
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	MONET	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 51/64 Rpt: 54/74			
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 03/15/2024	 Full name of contributor	-)	7	Amount of Contribution (\$)	\$500.00		
_		Cedar Park, TX 78613	1-						
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)				
	Date 03/15/2024	Full name of contributor out-of-state PA Sosa O.D., Virginia Contributor address; City; State; Zip Code	-)		Amount of Contribution (\$)	\$100.00		
	Principal occu	Uvalde, TX 78801 pation / Job title (See Instructions)		Employer (See Instructions	i)				
	Optometrist				,				
	Date 03/15/2024	Full name of contributor out-of-state PA Stephens O.D., Nancy Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$20.20		
		Pearland, TX 77581							
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 03/15/2024	Full name of contributor out-of-state PA Steven O.D., Kurtin Contributor address; City; State; Zip Code Dallas, TX 75252	-			Amount of Contribution (\$)	\$192.53		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>				
	Date 03/15/2024	Full name of contributor out-of-state PA Stokol O.D., Arnold Contributor address; City; State; Zip Code Richardson, TX 75080				Amount of Contribution (\$)	\$200.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)				
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	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 52/64 Rpt: 55/74		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor	·	7	Amount of Contribution (\$)	\$20.20	
		Big Spring, TX 79720	1				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Strong O.D., Jane Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00	
	Dringing age	Cypress, TX 77419	Employer (Coo Instructions	<u></u>			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Studebaker O.D., Emily Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$5.20	
		Georgetown, TX 78626					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Sturm O.D., Mark Contributor address; City; State; Zip Code Austin, TX 78749)	•	Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Sullivan O.D., Mitchell Contributor address; City; State; Zip Code Carrollton, TX 75006			Amount of Contribution (\$)	\$5.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIB		SCHEDULE A1			
	The Instru	ction Guide explains how to complete	e this form.	1	Total pages Schedule A1: Sch: 53/64 Rpt: 56/74		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor out-of-state F out-of-stat			Amount of Contribution (\$)	\$100.00	
_	5	Houston, TX 77058	- la	(0.1.1.1)			
8	Optometrist	pation / Job title (See Instructions)	9 Employer	(See Instructions)			
	Date 03/15/2024	Full name of contributor out-of-state F Ta O.D., Diane Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$47.76	
	Principal occu	Arlington, TX 76015 pation / Job title (See Instructions)	Employer	(See Instructions)			
	Optometrist	oation / Job title (See Instructions)	Lilipioyei	(See mandenons)			
	Date 03/15/2024	Full name of contributor out-of-state F Taylor O.D., Alicia Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$5.00	
		Dallas, TX 75243					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer	(See Instructions)			
	Date 03/15/2024	Full name of contributor out-of-state F Taylor O.D., Erin Contributor address; City; State; Zip Code Amarillo, TX 79110	AC (ID#:)	Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer	(See Instructions)			
	Date 03/15/2024	Full name of contributor out-of-state F Terrell O.D., Jenny Contributor address; City; State; Zip Code Hurst, TX 76054	PAC (ID#:		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer	(See Instructions)			
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	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 54/64 Rpt: 57/74		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00	
		Hutto, TX 78634					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Thomas O.D., Jack Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00	
	Deire sin al access	Amarillo, TX 79109	Frankrije (Con koderskier				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Thomas O.D., Jeff Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		Melissa, TX 75454					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (IE Thompson O.D., Melanie Contributor address; City; State; Zip Code Amarillo, TX 79109)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (IEThornton O.D., Kristofer Contributor address; City; State; Zip Code Longview, TX 75605	<u>1</u>)#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
			1				

	MONET	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 55/64 Rpt: 58/74			
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 03/15/2024	 Full name of contributor out-of-state Tilson O.D., Alan Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00		
_		Irving, TX 75038	1-						
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)				
	Date 03/15/2024	Tovias O.D., Mayra	PAC (ID#:			Amount of Contribution (\$)	\$100.00		
	Dringing agg	Santa Fe, TX 77510		Employer (See Instructions	<u></u>				
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 03/15/2024	Full name of contributor out-of-state Tran O.D., Anthony Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00		
		Dallas, TX 75206							
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 03/15/2024	Tran O.D., Jessica	PAC (ID#:)		Amount of Contribution (\$)	\$20.20		
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 03/15/2024	Full name of contributor out-of-state Tran O.D., Joshua Contributor address; City; State; Zip Code Richmond, TX 77407				Amount of Contribution (\$)	\$5.20		
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)				
			1						

	MONET	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to comp	plete this for	m.	1	Total pages Schedule A1: Sch: 56/64 Rpt: 59/74			
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 03/15/2024	 Full name of contributor out-of-s Tran O.D., Lori Contributor address; City; State; Zip Co)	7	Amount of Contribution (\$)	\$200.00		
		Plano, TX 75024	ı						
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	i)				
	Date 03/15/2024	Tran O.D., Toan)		Amount of Contribution (\$)	\$50.00		
		Carrollton, TX 75010							
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 03/15/2024	Full name of contributor out-of-s Trichel O.D., Jessica Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$)	\$19.01		
		Texarkana, TX 75503							
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)				
	Date 03/15/2024	Trinh O.D., Kim)		Amount of Contribution (\$)	\$50.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>				
	Date 03/15/2024	Tupa O.D., Faye				Amount of Contribution (\$)	\$50.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 57/64 Rpt: 60/74		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 03/15/2024	 Full name of contributor	_	7	Amount of Contribution (\$)	\$100.00	
_		San Antonio, TX 78258	1				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Twa O.D., Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Deinsinal assu	Houston, TX 77019	Frankrije (Coo kodernostiono	_			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Tybor O.D., David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$400.00	
		Austin, TX 78749	1				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Tybor O.D., John Contributor address; City; State; Zip Code Austin, TX 78746)		Amount of Contribution (\$)	\$19.01	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Upchurch O.D., Alan Contributor address; City; State; Zip Code McKinney, TX 75070			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 58/64 Rpt: 61/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Urizar O.D., Jocelyn 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00	
0	Dringing oggu	Houston, TX 77077	Employer /See Instruction			
8 Principal occupation / Job title (See Instructions) Optometrist 9 Employer (See Instructions)		5)				
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Valdes O.D., Matt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
	Principal occu	San Antonio, TX 78248 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Accountant	oddon 7 oob tille (oee molidellons)	Employer (See Managaria	<i>3)</i>		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Vasquez O.D., Celina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Palmview, TX 78572				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Voigt O.D., Kevin Contributor address; City; State; Zip Code Corpus Christi, TX 78414			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (II Vorster O.D., Edward Contributor address; City; State; Zip Code Silsbee, TX 77656			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 59/64 Rpt: 62/74		
2	FILER NAME Texas Optor	FILER NAME Texas Optometric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Wagner O.D., Troy 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$200.00	
_		The Woodlands, TX 77382		<u></u>		
8 Principal occupation / Job title (See Instructions) Optometrist 9 Employer (See Instructions)		5)				
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wallace O.D., August Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20	
		Longview, TX 75603				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Walters O.D., Mary Kate Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$47.76	
		Fort Worth, TX 76008				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Walters O.D., Mary Kate Contributor address; City; State; Zip Code Fort Worth, TX 76008)		Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wampler O.D., Kim Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 60/64 Rpt: 63/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Warstler O.D., Ashley 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00	
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	9 Employer (See Instructions)		
Optometrist Optometrist		,				
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Watt O.D., Kristen Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$20.20
		Stephenville, TX 76401				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Wedel O.D., Karl Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: Weedman O.D., Audrey Contributor address; City; State; Zip Code New Braunfels, TX 78132)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#: West O.D., Jacob Contributor address; City; State; Zip Code Flint, TX 75762)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 61/64 Rpt: 64/74	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wiatrek O.D., Beverly 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00	
_		San Antonio, TX 78223	I	Ĺ		
8 Principal occupation / Job title (See Instructions) Optometrist 9 Employer (See Instructions		5)				
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wiechmann O.D., Alexandra Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$20.20
	Principal occu	San Antonio, TX 78209 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Optometrist					
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wild O.D., Tristan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Austin, TX 78730				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024 Full name of contributor out-of-state PAC (ID#:) Wilken O.D., Bret Contributor address; City; State; Zip Code Coppell, TX 75019			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Williams O.D., Bryan Contributor address; City; State; Zip Code Dallas, TX 75226			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 62/64 Rpt: 65/74	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Williams O.D., James 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00		
_		Joplin, MO 64804				
8 Principal occupation / Job title (See Instructions)Optometrist9 Employer (See Instructions)		er (See Instructions)				
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wilson O.D., Kent Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu	Terrell, TX 75160 pation / Job title (See Instructions)	Employe	er (See Instructions)		
	Optometrist	pation / Job title (See Instructions)	Еттрюуч	er (See mstructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wineinger O.D., Jeffrey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Cedar Park, TX 78613				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employe	er (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Wong O.D., Joyce Contributor address; City; State; Zip Code El Paso, TX 79912			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employe	er (See Instructions)		
	Date 03/15/2024	Wright O.D., David	-state PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employe	er (See Instructions)		
			1			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 63/64 Rpt: 66/74		
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Wright O.D., Lance 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00		
		Seminole, TX 79360					
8 Principal occupation / Job title (See Instructions)9 Employer (See Instructions)Optometrist		5)					
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Yates O.D., Ashleigh Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.40	
	Principal occu	San Antonio, TX 78247 pation / Job title (See Instructions)		Employer (See Instructions	·/-		
	Optometrist	oalion / Job title (See instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/15/2024 Yee O.D., Jamie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Dallas, TX 75033					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date O3/15/2024 Full name of contributor out-of-state PAC (ID#:) Yeh O.D., Shihwei Contributor address; City; State; Zip Code Frisco, TX 75035			Amount of Contribution (\$)	\$50.00		
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state Paragraphy out-o				Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			l .				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 64/64 Rpt: 67/74		
2	FILER NAME Texas Optometric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 03/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Zachry O.D., Kayla 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.20	
•	Principal occu	Kerrville, TX 78028	Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Zhang O.D., Joyce Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$20.20
		San Antonio, TX 78209				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Zike O.D., Abigail Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00
	Principal occu	College Station, TX 77845 spation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 68/74	Texas Optometric PAC 00015622
4 Date	5 Payee name
03/20/2024	Brent Money Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2606 Lee St.
Expenditure from corporate funds	Greenville, TX 75401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
-	Candidate/Officeholder/Political Committee Campaign Contributions
	Campaign Continuations
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/20/2024	Caroline Fairly Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 20445
Expenditure from	Amarillo, TX 79114
corporate funds	In.
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Contributions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/20/2024	Dade Phelan Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 848
- Cynonditure from	
Expenditure from corporate funds	Nederland, TX 77627
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV. office health of the Companition of the Contribution of Texas.
	Candidate/Officeholder/Political Committee Campaign Contributions
	Campaign Contributions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

19 Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schodule F1:	,
1 Total pages Schedule F1: Sch: 2/5 Rpt: 69/74	Texas Optometric PAC 00015622
•	·
4 Date	5 Payee name
03/20/2024	Hillary Hickland Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	6318 Brayson Oaks Court
Expenditure from corporate funds	Belton, TX 76513
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contributions
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/20/2024	Janice Holt Campaign
Amount (\$)	
\$1,000.00	Payee address; City; State; Zip Code PO Box 1311
\$1,000.00	PO BOX 1311
Expenditure from	
corporate funds	Silsbee, TX 77656
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Jarvis Johnson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5319 Alba
Expenditure from corporate funds	Houston, TX 77091
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contributions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 70/74	Texas Optometric PAC 00015622
4 Date	5 Payee name
03/20/2024	Jeff Bauknight Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 4122
Expenditure from corporate funds	Victoria, TX 77903
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contributions
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
03/20/2024	Joanne Shofner Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	638A N. University Drive #17
Expenditure from corporate funds	Nacogdoches, TX 75965
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuutions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
03/20/2024	Marc LaHood Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4014 McCullough Ave.
. ,	
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
D. LIBITORE	Candidate/Officeholder/Political Committee
	Campaign Contributions
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
,	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 71/74	Texas Optometric PAC 00015622
4 Date	5 Payee name
03/20/2024	Matt Morgan Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 503 FM 359 Ste. 130, #265
Expenditure from corporate funds	Richardson, TX 77406
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign Contributions
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Mitch Little Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2841 Seven Shields Lane
Expenditure from corporate funds	The Colony, TX 75056
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contributions
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Shelly Luther Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 587 White Mound Rd.
Expenditure from corporate funds	Sherman, TX 75090
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contributions
Complete ONLY if direct expenditure to benefit C/OI	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

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 72/74	Texas Optometric PAC 00015622
4 Date	5 Payee name
03/20/2024	Stephanie Klick Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	PO Box 7592
Expenditure from corporate funds	Fort Worth, TX 76111
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Contributions
	Land Land
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
·	
Date	Payee name
03/20/2024	Trey Wharton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1242
Expenditure from	Huntsville, TX 77340
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Campaign Contributions
	Campaign Contributions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
03/20/2024	Wes Virdell Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 147
Expenditure from	Drady, TV 7602F
corporate funds	Brady, TX 76825
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Campaign Contributions
	Campaign Contributions
Occupation Children	Openhalte (Office helder warms and Office helder warms
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,poa.a.a to bonom 0/01	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

The Instruction Guide explains how to complete this form.			
Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622	
1 Date 03/07/2024	5 Payee name Authorize.net		
388.13 Expenditure from corporate funds	7 Payee Address; City; State; Zip 808 E Utah Valley Dr American Fork, UT 84003		
B PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees	
Date 03/11/2024	Payee name Carriage House Partners		
Amount (\$) 6,250.00 Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Hidden Trails Arlington, TX 76017		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Lobbyist	
Date 03/15/2024	Payee name Clem, Mike		
Amount (\$) 1,669.05 Expenditure from corporate funds	Payee Address; City; State; Zip 10155 Shadyview Dallas, TX 75238		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description (See instructions regarding type of information required: Accounting Services & Bank Fees	
Date 03/20/2024	Payee name Fedex		
Amount (\$) 309.96 Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 660481 Dallas, TX 75266		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Delivery	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

The Instruction Guide explains how to complete this form.			
Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622	
Date 03/20/2024	5 Payee name Membership marketing		
798.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip 1280 Perimeter Pkwy Virgina Beach, VA 23454		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Marketing	
Date	Payee name		
03/25/2024	Paypal		
Amount (\$) 480.90 Expenditure from corporate funds	Payee Address; City; State; Zip 2211 North First Street San Jose, CA 95131		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required. Payment fee	
Date	Payee name		
03/23/2024	QuickBooks Payments		
Amount (\$) 639.50 Expenditure from	Payee Address; City; State; Zip 2632 Marine Way		
X corporate funds	Mountain View, CA 94043		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required. Accounting Services & Bank Fees	
Date 03/20/2024	Payee name TOA Facility		
Amount (\$) 950.00	Payee Address; City; State; Zip 3011 N Lamar ste 300		
Expenditure from corporate funds	Austin, TX 78701		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required. Facility Fee	