CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00087899	ssion Filers)	2 Total pages fi 8	led: 30
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		USE ONLY
OFFICEHOLDER	Mrs.	Denise V.				
NAME		Bonnoo VI			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	07/14/2024	
		Wilkerson				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
MAILING	1808 Winewood Lane					
ADDRESS					Receipt #	Amount
Change of Address	Arlington, TX 76013					
	5				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME	Mr.	Gabriel				
	NICKNAME	LAST		SUFFIX		
		Rivas		IV		
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	2024 Mill Creek Dr	,,				
ADDRESS						
(Residence or Business)						
	Arlington, TX 76010					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER	EXTENSION			
TREASURER						
PHONE	(817) 899-4622					
8 REPORT TYPE	January 15	20th day befor		Runoff	1 15th day after as	mpaign treasurer
		30th day before		Ruhon	appointment (offi	ceholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
				reporting limit	1	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	HROUGH	06/30/2024		
	01/01/2024			00/00/202	T	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
10 ELECTION	Month Day Year		Primary		Other	
	11/05/2024		lillary	Kunon		
	11/03/2024	X	Seneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
				State Representa	ative District 94	
		GO 1	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	5	Versi	on V4.1.0.d378aba0

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 80

13 C / OH NAME	Wilkerson, Denise V.	(Mrs.)	14 Filer ID 00087899	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC	, ,	\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 37,962.25
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 8,623.77
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 25,845.08
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 9,938.00
17 AFFIDAVIT	•			•
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	y of perjury, that the ac Il information required	companying report is to be reported by me
		Mrc. D	venice) () Willycroon	
			enise V. Wilkerson Candidate or Officeho	lder
	TARY STAMP / SEAL AB	, i i i i i i i i i i i i i i i i i i i		
		aid ertify which, witness my hand and seal of office.	, this the	day
UI	, 20, 10 0	כומיץ שהוכח, שונוכסס וויץ חמוע מוע סכמו טו טווונפ.		
Signature of offi	cer administering	Printed name of officer administering	Title of office	er administering oath
Forms provided by Te	exas Ethics Commission	n www.ethics.state.tx.us		Version V4.1.0.d378aba0

SUBTOTALS - C/OH	С		ОRM C/OH НЕЕТ РС 3 3 of 80
18 FILER NAME Wilkerson, Denise V. (Mrs.)	19 Filer ID 00087899	(Ethics Con	mission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBT	DTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	32,413.47
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5,548.78
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. SCHEDULE E: LOANS		\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	8,623.77
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	TIONS	\$	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	S OF C/OH	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$	
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	S RETURNED	\$	16.59

The Instru	ction Guide explains how	v to complete this f	örm.	1	Total pages Schedule A1: Sch: 1/50 Rpt: 4/80	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
Wilkerson, D	Denise V. (Mrs.)				00087899	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
06/29/2024	Adams, Barbara	_				\$25.00
	6 Contributor address; City; St	tate; Zip Code				
	Arlington, TX 76015					
-	upation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		
Teacher			Retired			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
06/28/2024	Ahmed, Syed					\$250.00
	Contributor address; City; St			1		
	Arlington, TX 76002					
Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	s)		
Examiner			Quest diagnostics			
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
06/28/2024	Ahmed, Syed					\$250.00
	Contributor address; City; St	tate; Zip Code				
	Arlington, TX 76002					
Principal occu	upation / Job title (See Instructions	3)	Employer (See Instructions	s)		
Examiner		I	Examone			
Date	Full name of contributor	out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
06/28/2024	Anacker, Jessica				• •	\$5.00
	Contributor address; City; St	tate: 7in Code		ł		·
	Arlington, TX 76006					
Principal occu	upation / Job title (See Instructions	3)	Employer (See Instructions	s)		
Self-employe	ed		Self-employed			
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
06/27/2024	Ayala, Jose					\$50.00
	Contributor address; City; St	tate [.] 7in Code				T -
	Arlington, TX 76013					
Principal occu	pation / Job title (See Instructions	<u></u>	Employer (See Instructions	<u> </u> s)		
Professor		<i>'</i>)	UT Arlington	.,		
			C			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1:	
			Sch: 2/50 Rpt: 5/80	
2 FILER NAME		;	3 Filer ID (Ethics Commission	Filers)
	penise V. (Mrs.)		00087899	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	* 50.00
06/28/2024	Ball, Sabrina			\$50.00
	6 Contributor address; City; State; Zip Code			
	Fort Worth, TX 76110			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Not Employe		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/29/2024	Bartholomee, Russell	/	Amount of Contribution (4)	\$25.00
02/20/202	Contributor address; City; State; Zip Code			<i>W</i>LU
	Contributor address, Gity, State, Zip Code			
	Arlington, TX 76006			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Teacher		Arlington ISD		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/31/2024	Becker, Karen			\$1.00
	Contributor address; City; State; Zip Code			
	Ponte Vedra Beach, FL 32082			
	pation / Job title (See Instructions)	Employer (See Instructions)		
Not Employe	pation / Job title (See Instructions)	Employer (See Instructions) Not Employed		
Not Employe	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_	Not Employed	Amount of Contribution (\$)	
Not Employe	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria	Not Employed		\$20.00
Not Employe	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria	Not Employed		\$20.00
Not Employe	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria	Not Employed		\$20.00
Not Employe	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code	Not Employed		\$20.00
Not Employe Date 06/30/2024	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria	Not Employed	Amount of Contribution (\$)	\$20.00
Not Employe Date 06/30/2024	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051	Not Employed	Amount of Contribution (\$)	\$20.00
Not Employe Date 06/30/2024 Principal occur retired	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions)	Not Employed	Amount of Contribution (\$)	\$20.00
Not Employe Date 06/30/2024 Principal occu	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions)	Not Employed	Amount of Contribution (\$)	\$20.00
Not Employe Date 06/30/2024 Principal occu retired Date	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Bennett, Carol	Not Employed	Amount of Contribution (\$)	
Not Employe Date 06/30/2024 Principal occu retired Date	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_	Not Employed	Amount of Contribution (\$)	
Not Employe Date 06/30/2024 Principal occu retired Date	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Bennett, Carol	Not Employed	Amount of Contribution (\$)	
Not Employe Date 06/30/2024 Principal occu retired Date	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Bennett, Carol	Not Employed	Amount of Contribution (\$)	
Not Employe Date 06/30/2024 Principal occu retired Date 03/06/2024	pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Beneaetto, Hilaria Contributor address; City; State; Zip Code Grapevine, TX 76051 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Bennett, Carol Contributor address; City; State; Zip Code	Not Employed	Amount of Contribution (\$)	

T I			1 Total pages Schedule A1:
The Instruc	ction Guide explains how to complete this f	orm.	Sch: 3/50 Rpt: 6/80
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Wilkerson, D	Denise V. (Mrs.)		00087899
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
06/17/2024	Bethune, John M.		\$50.00
	6 Contributor address; City; State; Zip Code		
	Arlington, TX 76011		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	<u> </u> 3)
Retired		none	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/20/2024	Bhandari, Ranjana		\$94.00
	Contributor address; City; State; Zip Code		
	Arlington, TX 76012		Ļ
Principal occup Not employe	pation / Job title (See Instructions)	Employer (See Instructions)	;)
Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$50.00
UZIZ9IZUZ4	Black, Jessica		φου.υυ
	Contributor address; City; State; Zip Code		
	Arlington, TX 76017		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	\$)
Stay at Home	e mom	None	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/28/2024	Booher, Stephen		\$25.00
	Contributor address; City; State; Zip Code		
	Denton, TX 76205		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>
Not Employe		Not Employed	<i>,</i>
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/01/2024	Botwinick, Lisa		\$2.00
	Contributor address; City; State; Zip Code		
	New York, NY 10011		
	pation / Job title (See Instructions)	Employer (See Instructions)	3)
Not employe	d	Not employed	

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/50 Rpt: 7/80	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Wilkerson, D	Denise V. (Mrs.)			00087899	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
03/01/2024	Broadhead, Susan				\$3.00
	6 Contributor address; City; State; Zip Code				
	Black Mountain, NC 28711				
-	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/10/2024	Brock, Michele				\$250.00
	Contributor address; City; State; Zip Code				
	Santa Fe, NM 87506	-			
	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired		Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/01/2024	Bunker, David				\$1.00
	Contributor address; City; State; Zip Code				
	Morecetor MA 01605				
Drippinglagg	Worcester, MA 01605				
Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	5)		
			.		
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	<u>ቀ100 00</u>
02/29/2024	Burnam, Lon				\$100.00
	Contributor address; City; State; Zip Code				
	Ft Worth, TX 76101				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
retired	parion / 002 and (200	State Rep	''		
Date	Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
06/30/2024	Burnham, Lon Maxwell	/			\$100.00
00,00,	Contributor address; City; State; Zip Code				*
	Fort Worth, TX 76102				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 ;)		
Retired State	e Rep	none			
		<u> </u>			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/50 Rpt: 8/80	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
Wilkerson, D	Denise V. (Mrs.)	00087899		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/23/2024	Butler, Molly			00.00
	6 Contributor address; City; State; Zip Code			
	Lakewood, CO 80215			
	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
Not Employe	;d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/01/2024	C, Anne		\$	\$5.00
	Contributor address; City; State; Zip Code			
	Douglas, MI 49406	<u> </u>		
	pation / Job title (See Instructions)	Employer (See Instructions))	_
Not Employe	?d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/10/2024	Cabasso, Jacqueline		\$3	34.00
	Contributor address; City; State; Zip Code			
	Oakland, CA 94609			
Principal occu Executive Di	ipation / Job title (See Instructions)	Employer (See Instructions)		
Executive Di		Western States Legal Fo		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/24/2024	Callaway, Terry		\$9	94.00
	Contributor address; City; State; Zip Code			
	Bedford, TX 76021			
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Not Employe		Not Employed	1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	¢1 00
02/27/2024	Camp, Roberta		\$	\$1.06
	Contributor address; City; State; Zip Code			
	Philadelphia, PA 19147			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Not Employe		Not Employed	!	
	,u	Not Employed		
		•		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/50 Rpt: 9/80 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Wilkerson, Denise V. (Mrs.) 00087899 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/01/2024 Camp, Roberta \$1.00 6 Contributor address; City; State; Zip Code Philadelphia, PA 19147 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/28/2024 \$2.00 Carey, Brenda Contributor address; City; State; Zip Code Medford, OR 97501 Principal occupation / Job title (See Instructions) Employer (See Instructions) RN Asante Rogue Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/09/2024 Collins, Karen \$500.00 Contributor address; City; State; Zip Code Austin, TX 78756 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not employed Not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2024 Corbin, Troy \$1.00 Contributor address; City; State; Zip Code Happy Valley, OR 97086 Principal occupation / Job title (See Instructions) Employer (See Instructions) H&S Consultant NW EH&SA Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/31/2024 \$25.00 Cortes, Luis Contributor address; City; State; Zip Code Los Angeles, CA 90025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Development Museum

	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 7/50 Rpt: 10/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Wilkerson, D	Denise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/27/2024	Cramer, Elinor					\$2.00
		6 Contributor address; City; State; Zip Co	ode				
		Syracuse, NY 13224					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	psychothera			Clinical Counseling Asso		ates	
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Darling, Grace C.	· · · · · ·			• •	\$30.00
		Contributor address; City; State; Zip Co					
		Arlington, TX 76010					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	06/26/2024	Darovich, Donna					\$25.00
		Contributor address; City; State; Zip Co	ode				
		Arlington TV 76017					
	Dringinal occu	Arlington, TX 76017	r	Employer (Soo Instructions			
	Not Employe			Employer (See Instructions Not Employed	9		
						Amount of Contribution (\$)	
	Date 02/29/2024	Darovich, Donna	state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	0212912024		!				Φ100.00
		Contributor address; City; State; Zip Co	ode				
		Arlington, TX 76017					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			None			
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	02/26/2024	David, Denise					\$10.00
		Contributor address; City; State; Zip Co	ode				
		San Diego, CA 92037					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe	;d		Not Employed			
4							

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	The Instru	ction Guide explains how to co	mplete this fo	orm.	1	Total pages Schedule A1: Sch: 8/50 Rpt: 11/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Wilkerson, D	Denise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor 🗌 out-	-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/01/2024	Davis, John					\$2.00
		6 Contributor address; City; State; Zip	Code		1		
		Dallingham MA 00220					
0	Dringing occu	Bellingham, WA 98229		2 Employer (See Instructions	<u> </u>		
8	Not employe	pation / Job title (See Instructions)		9 Employer (See Instructions Not employed	5)		
					.		
	Date		-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>ቀ10 00</u>
	03/01/2024	Davis, Mary					\$10.00
		Contributor address; City; State; Zip	Code				
		Thornton, CO 80602					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Not Employe	,		Not Employed			
	Date	Full name of contributor	-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/22/2024	Dawson, Robert					\$100.00
		Contributor address; City; State; Zip	Code		1		
		Arlington, TX 76013					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	;d		Not Employed			
	Date	Full name of contributor	-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/03/2024	Deren, Nancy					\$3.64
		Contributor address; City; State; Zip	Code		1		
		Gainesville, FL 32653					
_	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ``		
	Not Employe			Not Employed	5)		
					Г	Amount of Contribution (4)	
	Date 03/01/2024	Full name of contributor out- Derrough, Roger	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$30.00
	00/01/2024		Codo		-		ΨΟ0.00
		Contributor address; City; State; Zip	Coue				
		Weaverville, NC 28787					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Not Employe	ed .		Not Employed			
			1				

					-		
т	he Instrue	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/50 Rpt: 12/80	
2 FI	ILER NAME				3	Filer ID (Ethics Commission	Filers)
W	/ilkerson, D	enise V. (Mrs.)				00087899	
4 D	ate	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
03	1/23/2024	Disnard, Ann					\$5.00
		6 Contributor address; City; Sta	ιte; Zip Code		1		
		Arlington, TX 76012					
		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
IN	lot Employe			Not Employed	_		
	ate	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
02	2/23/2024	Disnard, Ann]		\$5.00
		Contributor address; City; Sta					
		Arlington, TX 76012					
Đ	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	lot Employe			Not Employed	5)		
					Τ	Amount of Contribution (¢)	
	ate 3/23/2024	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5.00
0.	3/23/2024	Disnard, Ann	to: Zin Codo		ł		ΦΟ.00
		Contributor address; City; Sta	ite; Zip Code				
		Arlington, TX 76012					
Pi	rincipal occu	n pation / Job title (See Instructions)		Employer (See Instructions	5)		
N	lot Employe	:d		Not Employed			
Da	ate	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
04	4/23/2024	Disnard, Ann	—				\$5.00
		Contributor address; City; Sta	ıte; Zip Code		1		
		Arlington, TX 76012					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
N	lot Employe	<u>،</u> ط		Retired			
D	ate	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
0	5/23/2024	Disnard, Ann					\$5.00
		Contributor address; City; Sta	te; Zip Code]		
		Automatica TV 76010					
	li sele al anavi	Arlington, TX 76012			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
IN	lot Employe	.d		Not Employed			

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/50 Rpt: 13/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Wilkerson, D	Denise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/23/2024	Disnard, Ann					\$5.00
		6 Contributor address; City; State;	Zip Code				
		Arlington, TX 76012					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Not Employe	ed .		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/31/2024	Dohoney, Tanya					\$100.00
		Contributor address; City; State;					
		Fort Worth, TX 76102					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	:d		Not Employed			
	Date		out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	01/20/2024	Dolese, Martha					\$10.00
		Contributor address; City; State;	Zip Code				
		Luling, TX 78648					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	substitute tea	acher		Luling ISD			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/29/2024	Duke, Lisa					\$50.00
		Contributor address; City; State;	; Zip Code				
		Arlington, TX 76012	1				
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Instructional	-		Self-Employed			
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/17/2024	Duke, Lisa					\$20.00
		Contributor address; City; State;	Zip Code				
		Arlington, TX 76012					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> וו		
	Instructor			American Airlines	"		
-			I				

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 11/50 Rpt: 14/80	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Denise V. (Mrs.)		00087899	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/27/2024	Duke, Suzanne			\$50.00
	6 Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	2)	
Not Employe		Not Employed	7	
Date			Amount of Contribution (\$)	
Date 02/29/2024	Duke, Suzanne)		\$50.00
ULILJILUL 4				φ00.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Retired	•	Retired	,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/04/2024	Dunn, Louise			\$15.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76002			
	upation / Job title (See Instructions)	Employer (See Instructions	;) ;)	
Not Employe	:d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/29/2024	Dyck, Debrah			\$100.00
	Contributor address; City; State; Zip Code			
	A-lington TV 76012			
Dringing occu	Arlington, TX 76013			
real estate b	ipation / Job title (See Instructions) iroker	Employer (See Instructions self	;)	
Date 06/04/2024	Full name of contributor out-of-state PAC (ID#: Dyck, Debrah)	Amount of Contribution (\$)	<u>ቀ100 00</u>
00/04/2024				\$100.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Real Estate		Self-Employed	,	

	The Instru	ction Guide explains how to con	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 12/50 Rpt: 15/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Wilkerson, D	enise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor out-of	-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/01/2024	Edelstein, Susan					\$3.00
		6 Contributor address; City; State; Zip C	Code		1		
		Cary, NC 27511					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u> נ)		
ľ	Not Employe			Not Employed	')		
_	Date		-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/26/2024	Edgeworth, James)			\$5.00
		Contributor address; City; State; Zip C	ode				+0.00
			Joue				
		Fort Worth, TX 76102					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Business De	velopment		CivicPlus			
	Date	Full name of contributor X out-of	-state PAC (ID#:) (290015025		Amount of Contribution (\$)	
	04/25/2024	Everytown for Gun Safety Action F	Fund				\$500.00
		Contributor address; City; State; Zip C	Code		1		
		New York, NY 10163			Ĺ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date		-state PAC (ID#:_)		Amount of Contribution (\$)	#0.00
	03/02/2024	Eyberg, Connie J.					\$2.00
		Contributor address; City; State; Zip C	Code				
		Fairfield, IA 52556					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Administrativ	ve Assistant		Maharishi University of I		nagement	
⊨	Date	Full name of contributor	-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/01/2024	Facio, Ana					\$5.00
		Contributor address; City; State; Zip C	Code				
		Sacramento, CA 95825					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			

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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/50 Rpt: 16/80	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	Denise V. (Mrs.)		00087899	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/07/2024	Farr, Natalie		\$2	25.00
	6 Contributor address; City; State; Zip Code		1	
	Arlington, TX 76015			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Speech Lanç	guage Pathologist	Epic		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/07/2024	Farr, Natalie			25.00
	Arlington, TX 76015			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)	
	guage Pathologist	Epic	,	
Date			Amount of Contribution (\$)	
Date 03/07/2024	Full name of contributor out-of-state PAC (ID#: Farr, Natalie		Amount of Contribution (\$)	25.00
03/01/2027			Ψ <u>~</u>	5.00
	Contributor address; City; State; Zip Code	ļ		
		ļ		
	Arlington, TX 76015			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
	guage Pathologist	Enployer (See Instructions Epic	»)	
			T	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/07/2024	Farr, Natalie		\$2	25.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76015	1		
	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Speech Lanç	guage Pathologist	Epic		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/07/2024	Farr, Natalie		\$2	25.00
	Contributor address; City; State; Zip Code		1	
	Arlington, TX 76015			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Speech Lanç	guage Pathologist	Epic		
		<u> </u>		

L						
	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 14/50 Rpt: 17/80	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Wilkerson, D	Denise V. (Mrs.)		1	00087899	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/07/2024	Farr, Natalie				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
		Adiastan TV 7601E				
	Dringing occu	Arlington, TX 76015 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
°		guage Pathologist	9 Employer (See Instructions Epic	S)		
⊨				1	1	
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	0212912024	Fleming, William				\$25.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76010				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		None			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	03/01/2024	Florkowski, David R			• •	\$2.00
	I	Contributor address; City; State; Zip Code		.		
		Baltimore, MD 21211				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	retired		none			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	06/27/2024	Gamber, Russell				\$25.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76012				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	ς,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	03/20/2024	George, Yleen	/			\$25.00
		Contributor address; City; State; Zip Code		.		• = • •
		Arlington, TX 76006				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Education		Retired			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 15/50 Rpt: 18/80
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	- Denise V. (Mrs.)		00087899
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
04/20/2024	5 /		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Arlington, TX 76006		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	
Education		Retired	<i>'</i> ,
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
05/20/2024		/	\$25.00
001201202.	Contributor address; City; State; Zip Code		
	CONTINUION AUGUESS, City, State, Zip Couc		
	Arlington, TX 76006		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	β)
Education		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/18/2024			\$25.00
	Contributor address; City; State; Zip Code		1
	Arlington, TX 76006		
	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Education		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/20/2024	George, Yleen		\$25.00
	Contributor address; City; State; Zip Code		1
	Arlington, TX 76006		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Education		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/29/2024			\$50.00
	Contributor address; City; State; Zip Code		1
	Arlington, TX 76006		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired		AISD	

The Instruction Guide explains how to complete this form.		Total pages Schedule A1: Sch: 16/50 Rpt: 19/80	
2 FILER NAME	3	Filer ID (Ethics Commission	n Filers)
Wilkerson, Denise V. (Mrs.)		00087899	-
4 Date 5 Full name of contributor out-of-state PAC (ID#:)) 7	Amount of Contribution (\$)	
03/01/2024 Gibbs, Ben			\$10.00
6 Contributor address; City; State; Zip Code			
Fort Myers, FL 33919			
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 	tions)		
Not Employed Not Employed			
Date Full name of contributor out-of-state PAC (ID#:)) .	Amount of Contribution (\$)	
02/26/2024 Gilbert, Mary			\$1.00
Contributor address; City; State; Zip Code			
Arlington, MA 02474			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)		
Not Employed Not Employed			
Date Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)	
02/29/2024 Gleason-Wynn, Pat			\$30.00
Contributor address; City; State; Zip Code			
Arlington, TX 76017			
	tione)		
Principal occupation / Job title (See Instructions)Employer (See Instructions)Not EmployedNot Employed	lionsj		
Date Full name of contributor out-of-state PAC (ID#:) 02/29/2024 Golden, Cvnthia)	Amount of Contribution (\$)	¢250.00
			\$250.00
Contributor address; City; State; Zip Code			
Arlington, TX 76016			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)		
retired retired	,		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/27/2024 Goldstein, Dale			\$1.00
Contributor address; City; State; Zip Code			¥±
Contributor address, City, State, Zip Code			
Levittown, PA 11756			
	tions)		
	tions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 17/50 Rpt: 20/80	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
Wilkerson, I	Denise V. (Mrs.)		00087899	-
4 Date	5 Full name of contributor out-of-state PAC (ID#	ŧ:)	7 Amount of Contribution (\$)	
05/31/2024	Gomoll, Terry			\$1.00
	6 Contributor address; City; State; Zip Code			
	Apopka, FL 32703		、	
8 Principal occu Not Employe	upation / Job title (See Instructions)	 9 Employer (See Instructions) Not Employed)	
Date		#:)	Amount of Contribution (\$)	÷4.00
06/01/2024				\$1.00
	Contributor address; City; State; Zip Code			
	Montpelier, VT 05602			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
manuscript		jnspg	,	
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)	
06/29/2024	Gregory, Dawna	··/		\$20.00
				T = T
	Pantego, TX 76013			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Spa Owner		Self		
Date	Full name of contributor Out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
03/01/2024	Grewell, Christine			\$2.00
	Contributor address; City; State; Zip Code			
	Cityor Caring MD 20010			
Drincinal occu	Silver Spring, MD 20910 upation / Job title (See Instructions)	Employer (See Instructions)		
Office Mana		Self)	
			to a state of the	
Date 02/17/2024	Full name of contributor out-of-state PAC (ID# Griffin, Bobbie	<u>*:)</u>	Amount of Contribution (\$)	\$25.00
UZI1112U24				ΦΖΟ.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employ		Not Employed	, ,	

				-		
The Instru	ction Guide explains how to c	complete this fo	rm.	1	Total pages Schedule A1: Sch: 18/50 Rpt: 21/80	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
Wilkerson, D	Denise V. (Mrs.)				00087899	
4 Date	5 Full name of contributor	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
05/31/2024	Gutfeld, Karen					\$1.00
	6 Contributor address; City; State; Z	Zip Code		1		
	Glendale, CA 91204					
8 Principal occu	pation / Job title (See Instructions)	9	B Employer (See Instructions	5)		
Not Employe	эd		Not Employed			
Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/30/2024	Hankins, Joshua					\$25.00
	Contributor address; City; State; Z			1		
	-					
	Arlington, TX 76012					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Physical The	erapist		Green Oaks PT			
Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/02/2024	Hanlon, Kevin					\$1.06
	Contributor address; City; State; Z	Zip Code		1		
	Vancouver, WA 98685					
	ipation / Job title (See Instructions)		Employer (See Instructions	5)		
Not Employe)d		Not Employed			
Date	Full name of contributor 🛛 🗍 o	ut-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
05/31/2024	Hardy, Kevin]		\$1.00
	Contributor address; City; State; Z	lip Code]		
	San Rafael, CA 94901					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Plumber			SWP			
Date	Full name of contributor o	ut-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
06/30/2024	Henderson, Nina					\$200.00
	Contributor address; City; State; Z	Zip Code		1		
	-					
	Arlington, TX 76016					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Realtor			Self			

Tł	he Instru	ction Guide explains how to complete thi	is form.		Total pages Schedule A1: Sch: 19/50 Rpt: 22/80	
2 FII	LER NAME			_	Filer ID (Ethics Commission	n Filers)
		Denise V. (Mrs.)			00087899	
4 Da	ate	5 Full name of contributor Out-of-state PAC (I	ID#:)	7 4	Amount of Contribution (\$)	
06	6/17/2024	Henderson, Nina				\$25.00
		6 Contributor address; City; State; Zip Code		"		
		Arlington, TX 76016				
		pation / Job title (See Instructions)	9 Employer (See Instruction	าร)		_
Re	ealtor		self			
Da	ate	Full name of contributor 🔲 out-of-state PAC (I	ID#:)	<i>F</i>	Amount of Contribution (\$)	
02	2/29/2024	Hightower, Chris				\$100.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76006				
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u>าร)</u>		
Di	irector of A	MA	AMA			
Da	ate	Full name of contributor 🔲 out-of-state PAC (I	 ID#:)		Amount of Contribution (\$)	
03	3/01/2024	Hill, George				\$3.00
		Contributor address; City; State; Zip Code				
		Falls Church, VA 22043				
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u>าร)</u>		
er	ngineer		self			
Da	ate	Full name of contributor 🔲 out-of-state PAC (I	 ID#:)		Amount of Contribution (\$)	
01	1/30/2024	Hillin, Jim				\$25.00
		Contributor address; City; State; Zip Code				
		Los Angeles, CA 90064				
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u>าร)</u>		
VF	FX Artist		Self			
Da	ate	Full name of contributor 🔲 out-of-state PAC (I	 ID#:)		Amount of Contribution (\$)	
06	6/27/2024	Hilton Pace, Shelley				\$94.00
		Contributor address; City; State; Zip Code				
		Weatherford, TX 76085				
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u>.</u> าร)		
wr	riter/design	ier	self			
			I			

The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/50 Rpt: 23/80	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Wilkerson, D	Denise V. (Mrs.)				00087899	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
05/31/2024	Himmel, Marilyn					\$1.00
	6 Contributor address; City; State	e; Zip Code		1		
	Coral Gables, FL 33134					
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
Not Employe	эd		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/29/2024	Hissin, Sarah	-				\$50.00
	Contributor address; City; State	e; Zip Code		1		
	Arlington, TX 76001	T				
	pation / Job title (See Instructions)		Employer (See Instructions	s)		
Student			University	_		
Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
03/01/2024	Holtmann, Helga					\$4.55
	Contributor address; City; State	e; Zip Code				
	Berkeley, CA 94703					
Princinal occu	pation / Job title (See Instructions)	r	Employer (See Instructions	<u> </u>		
Not Employe			Not Employed	5)		
Date	Full name of contributor			Г	Amount of Contribution (\$)	
05/26/2024	Hopper, Sarah	out-of-state PAC (ID#:)			\$100.00
0012012024		e: Zin Codo		-		Ψ100.00
	Contributor address; City; State	3; Zip Coue				
	Arlington, TX 76016					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
Not Employe	эd		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
06/18/2024	Horton, Walter E.	-				\$5,000.00
	Contributor address; City; State	e; Zip Code		1		
	North Richland Hills, TX 761	180				
	pation / Job title (See Instructions)		Employer (See Instructions	s)		
Real Estate			Self			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 21/50 Rpt: 24/80
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Wilkerson, Denise V. (Mrs.)	00087899
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/09/2024 Howell, Mark	\$10.00
6 Contributor address; City; State; Zip Code	
orlington TV 76010	
arlington, TX 76010 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction)	
jeweler selfemployed	nis)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/04/2024 Hughes, Susan	\$100.00
Contributor address; City; State; Zip Code	
Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/25/2024 Hull, Megan	\$250.00
Contributor address; City; State; Zip Code	
Washington, DC 20009	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Activist Self	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/28/2024 Hussain, Adnan	\$100.00
Contributor address; City; State; Zip Code	
Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Sales Qualtrics	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/18/2024 Hutcherson, Denise	\$500.00
Contributor address; City; State; Zip Code	
Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Employer (See Instruction	uns)

	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 22/50 Rpt: 25/80	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Denise V. (Mrs.)		1	00087899	,
4	Date	5 Full name of contributor X out-of-state PAC (II	D#: <u>C00027342</u>)	7	Amount of Contribution (\$)	
	02/29/2024	IBEW PAC Voluntary Fund				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		Washington, DC 20001				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	PAC					
	Date	Full name of contributor X out-of-state PAC (II			Amount of Contribution (\$)	
	03/15/2024	International Brotherhood of Electrical Worke	ers			\$2,500.00
	Contributor address; City; State; Zip Code					
		Machington DC 20001				
	Dringinal occu	Washington, DC 20001	Employer (See Instructions	<u> </u>		
	Pilicipai occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Data			1	Amount of Contribution (ft)	
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	¢25.00
	01/25/2024	Jabri, Nidal				\$25.00
	Contributor address; City; State; Zip Code					
		Arlington, TX 76016				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Scientist		Walgreens			
	Date	Full name of contributor out-of-state PAC (II	D#:)	Ι	Amount of Contribution (\$)	
	05/08/2024	Jabri, Nidal Radwan				\$100.00
		Contributor address; City; State; Zip Code		1		
		Arlington, TX 76016				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Data Scienti	st	Walgreens			
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	_
	06/17/2024	Joeckel, David]		\$1,000.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76013				
	Dringinal occu		Employer (See Instructions	<u> </u>		
	Attorney	ipation / Job title (See Instructions)	Employer (See Instructions self	5)		
	Alloniey		3011			

The	Instruc	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 23/50 Rpt: 26/80	
2 FILER	R NAME				3	Filer ID (Ethics Commission	Filers)
		enise V. (Mrs.)				00087899	1 110.07
4 Date		5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
06/22	2/2024	Johnson, Joseph					\$25.00
		6 Contributor address; City; State; Zip Code					
		Colleyville, TX 76034					
		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Acco	ountant			Atc			
Date		Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
06/14	4/2024	Johnson, Lynn					\$34.00
		Contributor address; City; State; Zip Code					
1							
		Fort Worth, TX 76110					
Princi	ipal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Not E	Employe	d		Not Employed			
Date		Full name of contributor out-of-state PAC	 C (ID#:)		Amount of Contribution (\$)	
02/27	7/2024	Jones, Jane					\$1.00
		Contributor address; City; State; Zip Code					
1							
		Crawfordville, FL 32327					
Princi	ipal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Not E	Employe	d		Not Employed			
Date		Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
05/31	1/2024	Kaplan, Barbara					\$1.00
1		Contributor address; City; State; Zip Code					
1							
1							
		New York, NY 10025					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
Not e	employe	d		Not employed			
Date		Full name of contributor 🛛 out-of-state PAC	 C (ID#:)		Amount of Contribution (\$)	
06/28	8/2024	Kauth, Daniel					\$25.00
1		Contributor address; City; State; Zip Code			ł		
1							
1							
l		ARLINGTON, TX 76013					
Princi	ipal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Sales	S			Kwalu			
			<u> </u>				

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	The Instru	ction Guide explains how to) complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/50 Rpt: 27/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Wilkerson, D	Denise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/01/2024	Keffer, Joe					\$2.00
		6 Contributor address; City; State;	; Zip Code				
0	Dringing occu	Richmond, CA 94801		Employer (See Instructions	<u> </u>		
8	Not Employe	pation / Job title (See Instructions)		9 Employer (See Instructions Not Employed	5)		
⊨			1		-		
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢100.00
	06/27/2024	Kelly, Michael					\$100.00
		Contributor address; City; State;	; Zip Code				
		Cleveland Heights, OH 44118	8				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Game Devel			Question LLC	,		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/10/2024	Kelly, Suzanne		/			\$200.00
	••••	Contributor address; City; State;					+
			, 210 0000				
		Crawford, TX 76638					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Teacher			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/02/2024	Kersting, John					\$3.00
		Contributor address; City; State;	; Zip Code				
	Dringing oog	OLYMPIA, WA 98506		Employer (Cap Instructions			
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀ160 00
	06/29/2024	Kinler, Ruth	T O 45				\$150.00
		Contributor address; City; State;	; Zip Code				
		Arlington, TX 76013					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe			Not Employed	,		
			I	 L			

				=		
The Instru	iction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/50 Rpt: 28/80	
2 FILER NAME			,	3	Filer ID (Ethics Commissio	on Filers)
	Denise V. (Mrs.)				00087899	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
03/10/2024	-		,			\$100.00
	6 Contributor address; City; S	State; Zip Code		1		
			,			
	Arlington, TX 76018		,			
Princinal occu	upation / Job title (See Instruction		9 Employer (See Instructions	د) ۲		
attorney	Jugion / Job une (See mondonom	15)	Stefanie Klein	<i>>)</i>		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Ī	Amount of Contribution (\$)	
03/02/2024	Koppelman, Ann S.		ł			\$2.73
	Contributor address; City; S	State; Zip Code		1		
		· ·	ļ			
Chapel Hill, SC 27516						
Principal occu	Principal occupation / Job title (See Instructions) Employer (See Instructions					
Clinical Psyc	chologist		Self			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
06/25/2024						\$1.00
	Contributor address; City; S	State: Zip Code				
		Juno, 210 0002	ł			
			ļ			
	Knoxville, TN 37919		ļ			
Principal occu	upation / Job title (See Instruction	้า ร)	Employer (See Instructions	<u> </u>		
Associate P		,	UT			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
05/31/2024		• • • ·	I		,	\$1.00
		State: Zip Code				
		State, Lip Coul	ļ			
			,			
	Chester, MA 07930		,			
Principal occı	upation / Job title (See Instruction	ns)	Employer (See Instructions	<u> </u>		
Driver		-,	UPS			
Date	Full name of contributor	X out-of-state PAC (ID#: 0	00068703)		Amount of Contribution (\$)	
04/19/2024			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Amount of Contracting (1)	\$1,000.00
• =	Contributor address; City; S					Ψ ± , •
		State, Zip Coue	,			
			,			
	New York, NY 10004		,			
Princinal OCCL	upation / Job title (See Instruction		Employer (See Instructions	د) ا		
T mopa cee		.3)		5)		
			<u> </u>			

	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 26/50 Rpt: 29/80	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Wilkerson, D	Denise V. (Mrs.)			00087899	-
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	04/09/2024	Leary, Pamela				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
	l					
	I	Arlington TV 76012				
0	Drincinal occu	Arlington, TX 76013 Ipation / Job title (See Instructions)	9 Employer (See Instructions			
8	Public Serva		Tarrant County TX	5)		
				T		
	Date		C (ID#:)		Amount of Contribution (\$)	фо <u></u> с ОО
	05/22/2024					\$25.00
	I	Contributor address; City; State; Zip Code				
	I					
	l	Arlington, TX 76013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Public Serva		Tarrant County TX			
	Date Full name of contributor Out-of-state PAC (ID#:		 C (ID#:)	Т	Amount of Contribution (\$)	
	02/27/2024 Leavitt, William		, (1011		· ····································	\$2.00
	Contributor address; City; State; Zip Code					
	I					
	I					
		Brooklyn, NY 11215				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	attorney		self			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	03/01/2024	Leavitt, William				\$5.00
	I	Contributor address; City; State; Zip Code		Ϊ		
	I					
	I	Drocktin NV 11015				
	Dringinal occu	Brooklyn, NY 11215 Ipation / Job title (See Instructions)	Employer (See Instructions			
	attorney		self	5)		
				Т		
	Date 05/31/2024	Full name of contributor out-of-state PAC) (ID#:)		Amount of Contribution (\$)	\$1.00
	05/31/2024					Φ1.00
	I	Contributor address; City; State; Zip Code				
	I					
	l	Malone, NY 12953				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe		Not Employed			
			I			

The Instruction G	uide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/50 Rpt: 30/80	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
Wilkerson, Denise V.	(Mrs.)				00087899	-
4 Date 5 Full n	ame of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
03/04/2024 Little	, Douglas					\$250.00
6 Contr	ibutor address; City; State;	Zip Code				
	hersburg, IA 52047					
8 Principal occupation / Jo	b title (See Instructions)		9 Employer (See Instructions	5)		
Farmer			Self			
		out-of-state PAC (ID#:)		Amount of Contribution (\$)	+=0.00
	, Stephen					\$50.00
Contr	Contributor address; City; State; Zip Code					
Arlin	gton, TX 76006					
	ob title (See Instructions)		Employer (See Instructions	<u> </u> נו		
Lawyer			Self	<i>,</i>		
	ame of contributor		`	<u> </u>	Amount of Contribution (\$)	
	h, Catherine	out-of-state PAC (ID#:)			\$40.00
		7in Code				Ψτ0.00
Conu	Contributor address; City; State; Zip Code					
Arlin	gton, TX 76018					
Principal occupation / Jo	ob title (See Instructions)		Employer (See Instructions	5)		
Social worker			Nys			
Date Full n	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
05/27/2024 Lyon	is, Franceen					\$25.00
Contr	ibutor address; City; State;	Zip Code				
Arlin	TV 76010					
	gton, TX 76012		Employer (See Instructions	<u> </u>		
Not employed			Not employed	5)		
	-f		Not employed	<u> </u>	t	
	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Zia Cada				Ψ20.00
Conta	ibutor address; City; State;					
Arlin	gton, TX 76012					
Principal occupation / Jo	bb title (See Instructions)		Employer (See Instructions	5)		
Not employed			Not employed			
		I				

	The Instru	ction Guide explains how to complete th	nis form.		pages Schedule A1: 28/50 Rpt: 31/80	
2	FILER NAME			3 Filer I	D (Ethics Commissio	on Filers)
		Denise V. (Mrs.)			7899	- ,
4	Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amou	Int of Contribution (\$)	
	05/23/2024	Mack, Donna				\$25.00
		6 Contributor address; City; State; Zip Code				
Ļ	Dringing Loopu	Arlington, TX 76013	Contraction			
8	Principal occu Consultant	ipation / Job title (See Instructions)	 9 Employer (See Instructions Donna Mack 	5)		
				1		
	Date	-	(ID#:)	Amou	Int of Contribution (\$)	* 2.00
	03/02/2024 Mackey, Claudia					\$2.00
	Contributor address; City; State; Zip Code					
		Stockton, CA 95209				
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	<i>)</i>		
				1 Amoi	at of Contribution (\$)	
	Date	Full name of contributor out-of-state PAC ((ID#:)	Amou	Int of Contribution (\$)	ቀጋ ባባባ በበ
	06/18/2024					\$2,000.00
	Contributor address; City; State; Zip Code					
		Arlington, TX 76006				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 S)		
	President		MEI			
╞	Date	Full name of contributor Out-of-state PAC ((ID#:)	Amou	Int of Contribution (\$)	
	05/31/2024	Malo, Christopher			× .	\$1.00
		Larkspur, CA 94939				
	•	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC ((ID#:)	Amou	Int of Contribution (\$)	
	05/31/2024	Mauldin, Karen				\$1.00
		Contributor address; City; State; Zip Code				
		Falls Church, VA 22044				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			

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	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 29/50 Rpt: 32/80	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Denise V. (Mrs.)			00087899	
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	06/20/2024	Maxwell, Stephen C.				\$250.00
		6 Contributor address; City; State; Zip Code		"		
Ļ	Dringinal agai	Fort Worth, TX 76107	C Employer (Coo Instruction	<u> </u>		
8	Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instruction Baeley Galyen	is)		
				-		
	Date	—	(ID#:)		Amount of Contribution (\$)	* 10.00
	04/10/2024					\$10.00
	Contributor address; City; State; Zip Code					
		Graham, TX 76450				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	<u> </u> וא		
	Pet care serv		Self	10,		
╞	Date	Full name of contributor Out-of-state PAC	(الم	Т	Amount of Contribution (\$)	
	06/01/2024	McGovern, Ella	(ID#)			\$100.00
	00,01,202					#±00.0 2
		Arlington, TX 76017				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC	(ID#:)	Τ	Amount of Contribution (\$)	
	03/01/2024	McKnight, Alan				\$2.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Willow, NY 12495		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instruction	1S)		
	artist		Alan McKnight	-		
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	÷4 00
	06/01/2024	Meyer, Naomi				\$1.00
		Contributor address; City; State; Zip Code				
		Waltham, MA 02453				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	<u>ן</u> (פו		
	lawyer		Greater Boston Legal S		ces	
┝						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 30/50 Rpt: 33/80	
2 FILER NAME			3 Filer ID (Ethics Commissi	on Filers)
	Denise V. (Mrs.)		00087899	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
02/29/2024	Meza, Terry			\$50.00
	6 Contributor address; City; State; Zip Code			
	Irving, TX 75015			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
State Rep		State of Texas		
Date)	Amount of Contribution (\$)	
06/04/2024	Miller, Helen			\$105.00
	Contributor address; City; State; Zip Code			
= : : .l	Arlington, TX 76017			
	upation / Job title (See Instructions)	Employer (See Instructions Lone Star Park)	
Customer Se				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/07/2024	Minton, Daniel			\$50.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76016			
Drincinal occu	apation / Job title (See Instructions)	Employer (See Instructions	A	
Veterinarian		Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	¢E 00
03/01/2024	Morse, William			\$5.00
	Contributor address; City; State; Zip Code			
	Cambridge, MA 02139			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>	
photographe	,	self	,	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
06/30/2024	Muslim Democratic Caucus of Texas	/	Amount of Contribution (4)	\$1,000.00
00,00,202	Contributor address; City; State; Zip Code			4 1,000.01
	Culturbulor address, City, State, Zip Code			
	Arlington, TX 76018			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) ;)	
PAC			,	

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The	Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/50 Rpt: 34/80	
2 FILER	R NAME			3	Filer ID (Ethics Commissio	on Filers)
		Denise V. (Mrs.)			00087899	J ,
4 Date		5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
03/01	1/2024	Mytels, Deborah				\$2.00
		6 Contributor address; City; State; Zip Code		1		
		Palo Alto, CA 94303				
8 Princip	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Not E	Employe	ed	Not Employed			
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
06/04	4/2024	NETC Democrats				\$1,000.00
	Contributor address; City; State; Zip Code					
		Colleyville, TX 76034				
Princip	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date		Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
03/01	1/2024	Newtown, Sheila				\$2.00
		Contributor address; City; State; Zip Code		1		
		De Peyster, NY 13633	· · · · · ·	L		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
NOT E	Employe	}d	Not Employed	_		
Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
05/01	1/2024	Nguyen, Huan				\$250.00
		Contributor address; City; State; Zip Code]		
		Alexandria V/A 22204				
Drincir		Alexandria, VA 22304 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Engin		pation / Job little (See instructions)	US Navy	5)		
				1		
Date	0,0004	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢150.00
04/30	0/2024	Nicol, Robert & Jane				\$150.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76013				
Princir	inal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
Retire			None	.,		
	•••					
1						

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	The Instru	ction Guide explains how to co	mplete this fo	orm.	1	Total pages Schedule A1: Sch: 32/50 Rpt: 35/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		Denise V. (Mrs.)				00087899	,
4	Date	5 Full name of contributor 🗌 out-o	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/26/2024	Nicolas, Daniella					\$5.00
		6 Contributor address; City; State; Zip	Code				
		Frisco, TX 75034					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Finance			welltower			
	Date	Full name of contributor out-o	of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/28/2024	Nunez, Ignacio (Dr.)					\$200.00
		Contributor address; City; State; Zip					
	· · · · · · · · · · · · · · · · · · ·						
		Arlington, TX 76013					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Physician			Retired			
	Date	Full name of contributor out-o	of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/17/2024	Ortiz, Giana					\$100.00
	Contributor address; City; State; Zip Code						
		Arlington, TX 76013					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Attorney			Ortiz Law Firm	_		
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2024	Ortiz, giana					\$100.00
		Contributor address; City; State; Zip	Code				
		Arlington, TX 76013					
┢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L		
	attorney			The Ortiz Law Firm	9		
⊨		Full name of contributor			_	Amount of Contribution (¢)	
	Date 06/23/2024	Overton, David	of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	0012012027		Codo				Ψ200.00
		Contributor address; City; State; Zip	Coue				
		Austin, TX 78723					
┢	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	 5)		
	Partner	· · ·		Opus Faveo Innovation		velopment	
┝			I	·		·	

-	The Instru	ction Guide explains how to complete this	; form.	1	Total pages Schedule A1: Sch: 33/50 Rpt: 36/80	
2 F	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Denise V. (Mrs.)			00087899	· ·
4 C	Date	5 Full name of contributor Dut-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
(06/25/2024	PInnacle LLC				\$2,000.00
		6 Contributor address; City; State; Zip Code		1		
		Arlington, TX 76010				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
L	LLC		real estate			
[Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
(02/28/2024	Perez, Mario				\$500.00
	Contributor address; City; State; Zip Code					
		Fort Worth, TX 76110				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
4	Attorney		Linebarger LLP			
[Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
(06/04/2024	Plazak, David J.				\$500.00
		Contributor address; City; State; Zip Code		1		
		Arlington, TX 76015				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Retired		None			
[Date	Full name of contributor out-of-state PAC (ID#	#:)	Ī	Amount of Contribution (\$)	
0	06/17/2024	Powell, Beverly				\$250.00
		Contributor address; City; State; Zip Code		1		
		Fort Worth, TX 76109				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
(Consultant		Self			
[Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
(03/24/2024	Powers, Sheryl				\$25.00
		Contributor address; City; State; Zip Code		1		
		New Waverly, TX 77358				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Instructor		Saic			

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The	e Instru	ction Guide explains how	<i>i</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/50 Rpt: 37/80	
2 FILE	ER NAME				3	Filer ID (Ethics Commission	i Filers)
Wilk	kerson, D	enise V. (Mrs.)				00087899	
4 Date	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)		7	Amount of Contribution (\$)			
01/1	18/2024	Raburn, Carol					\$25.00
		6 Contributor address; City; St	tate; Zip Code		1		
		Arlington, TX 76013					
		pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		
Eng	gineer			Retired			
Date	9	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
02/1	18/2024	Raburn, Carol					\$25.00
		Contributor address; City; St			1		
		Arlington, TX 76013					
		pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
Eng	gineer			Retired			
Date	9	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
03/1	18/2024	Raburn, Carol					\$25.00
		Contributor address; City; Si			1		
		Arlington, TX 76013		 			
	•	pation / Job title (See Instructions	;)	Employer (See Instructions	s)		
Eng	gineer			Retired	_		
Date		Full name of contributor	out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
04/1	18/2024	Raburn, Carol					\$25.00
		Contributor address; City; St	tate; Zip Code]		
		Arlington TV 76012					
During		Arlington, TX 76013	<u></u>		Ĺ		
		pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
	gineer			Retired	-		
Date		Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	÷05.00
05/1	18/2024	Raburn, Carol					\$25.00
		Contributor address; City; St	tate; Zip Code				
		Arlington TV 76012					
Drin	in al agou	Arlington, TX 76013	<u></u>				
		pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
Eng	gineer			Retired			

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	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 35/50 Rpt: 38/80	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Wilkerson, D	Denise V. (Mrs.)			00087899	-
4	Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7	Amount of Contribution (\$)	
	06/18/2024	Raburn, Carol				\$25.00
	1	6 Contributor address; City; State; Zip Code		"		
		Arlington, TX 76013				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Engineer		Retired			
	Date	Full name of contributor out-of-state PAC (I	ID#:)	T	Amount of Contribution (\$)	
	06/17/2024	Raburn, Carol				\$30.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Engineer		Retired	5)		
╞	_			Т	Amount of Contribution (ft)	
	Date		ID#:)		Amount of Contribution (\$)	ቀንድ በበ
	05/22/2024					\$25.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76013				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I s)		
	Retired		Retired			
╞	Date	Full name of contributor Out-of-state PAC (I		Т	Amount of Contribution (\$)	
	06/14/2024	Rader, Andrea			,	\$25.00
		Contributor address; City; State; Zip Code		·		
		Arlington, TX 76013				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (I	D#:)	T	Amount of Contribution (\$)	
	05/31/2024	Reasons, Jo				\$1.00
	I	Contributor address; City; State; Zip Code		"		
		Port Orchard, WA 98367				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	;d	Not Employed			

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/50 Rpt: 39/80	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
_		Denise V. (Mrs.)			00087899	
4	Date	te 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
	04/11/2024	Reynolds, Ronald				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Arlington, TX 76013				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Environment	tal management	International Power			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/01/2024	Richardson, Jane				\$5.00
		Contributor address; City; State; Zip Code		1		
		Durham, SC 27710				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	scientist	,	Duke University			
╞	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	01/13/2024	Rivas, Gabriel				\$20.00
				1		·
		Arlington, TX 76015				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>г</u> 3)		
	Community	Outreach Coordinator	Tarrant County			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/13/2024	Rivas, Gabriel	/		,	\$20.00
	•=,==:	Contributor address; City; State; Zip Code		1		·
		Arlington, TX 76015				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	」 3)		
	•	Outreach Coordinator	Tarrant County	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	
	03/13/2024	Rivas, Gabriel	/			\$20.00
	00/10/202 .			-		Ψ20.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76015				
┣—	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	Γ		
		Outreach Coordinator	Tarrant County	3)		
	Community					
1						l

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 37/50 Rpt: 40/80	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Wilkerson, D	Denise V. (Mrs.)			00087899	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/13/2024	Rivas, Gabriel				\$20.00
	I	6 Contributor address; City; State; Zip Code		1		
		Advington TV 7601E				
0	Dringingl occu	Arlington, TX 76015	Employer (See Instructions	<u> </u>		
		ipation / Job title (See Instructions) Outreach Coordinator	9 Employer (See Instructions Tarrant County	5)		
				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/13/2024					\$20.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76015				
	Dringingl occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		Outreach Coordinator	Tarrant County	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	* 22.00
	06/13/2024	Rivas, Gabriel				\$20.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76015				
	Princinal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
		Outreach Coordinator	Tarrant County	-,		
	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	02/29/2024	Rivas, Gabriel	/			\$50.00
	52,20,202.	Contributor address; City; State; Zip Code		•		400.00
		כטוונווטענטו מעעובסס, כונץ, סומנכ, בוף כסעכ				
		Arlington, TX 76006				
ſ	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Community (Outreach Coordinator, Tarrant CO.				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
ſ	03/02/2024	Robinson, David				\$20.00
	I	Contributor address; City; State; Zip Code		1		
		Jasper, WY 30143				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed set of the set of t	Not Employed			
			•			

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 38/50 Rpt: 41/80	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	- Denise V. (Mrs.)		00087899	1 110.07
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/26/2024				\$50.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75201			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Not Employ	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/25/2024	5 /			\$25.00
	Contributor address; City; State; Zip Code			
	Bedford, TX 76021			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
retired		none		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/01/2024	—			\$2.00
	Contributor address; City; State; Zip Code			
	PITTSBURGH, PA 15235			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employ	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/17/2024	· ·			\$100.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76012			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Financial A	dvisor	Edward Jones		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/21/2024	Ruland, Michael			\$25.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78724			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Self-employ	red	Mike Ruland		
		•		

2 FILER NAME	1 Total pages Schedule A1: Sch: 39/50 Rpt: 42/80
Million Device V (Mare)	3 Filer ID (Ethics Commission Filers)
Wilkerson, Denise V. (Mrs.)	00087899
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 05/21/2024 Ruland, Michael 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$6.00
Austin, TX 78724	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction) Self-employed Mike Ruland	ons)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/21/2024 Ruland, Michael	\$6.00
Contributor address; City; State; Zip Code Austin, TX 78724	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	l ons)
Self-employed Mike Ruland	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2024 Sahloul, Lien	\$15.00
Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	l ons)
Teacher International Leaders	,
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) 06/28/2024 Salem, M. Emad	\$94.00
06/28/2024 Salem, M. Emad	
06/28/2024 Salem, M. Emad Contributor address; City; State; Zip Code	ons)
06/28/2024 Salem, M. Emad Contributor address; City; State; Zip Code Euless, TX 76040 Principal occupation / Job title (See Instructions) Employer (See Instructions)	ons) y Amount of Contribution (\$)
06/28/2024 Salem, M. Emad Contributor address; City; State; Zip Code Euless, TX 76040 Principal occupation / Job title (See Instructions) Realtor Date Full name of contributor out-of-state PAC (ID#:)	ons) y Amount of Contribution (\$)
06/28/2024 Salem, M. Emad Contributor address; City; State; Zip Code Euless, TX 76040 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Sellstate Metro Realty Date Full name of contributor 05/31/2024 Schatzman, Stacy Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$150.99

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 40/50 Rpt: 43/80	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Denise V. (Mrs.)		00087899	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/20/2024	Schick, Thomas			\$10.00
	6 Contributor address; City; State; Zip Code			
	Arlington TV 76012			
8 Principal occu	Arlington, TX 76012 pation / Job title (See Instructions)	9 Employer (See Instructions)	<u>\</u>	
Not Employe		Not Employed)	
Date)	Amount of Contribution (\$)	¢10.00
03/02/2024				\$10.00
	Contributor address; City; State; Zip Code			
	Santa Barbara, CA 93105			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
clinical psych		self		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
04/21/2024	Scott, Skipper)		\$50.00
04,21,202.				Ψ00.00
	Contributor address, City, State, Zip Code			
	Burleson, TX 76028			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	ed.	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/28/2024	Settle, Charles			\$94.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
-	pation / Job title (See Instructions)	Employer (See Instructions))	
Attorney		Thompson Coe		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/25/2024	Sexton, Julia			\$50.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76013			
-	pation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	:d	Not Employed		

T	he Instru	ction Guide explains how	<i>i</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/50 Rpt: 44/80	
2 FI	ILER NAME				3	Filer ID (Ethics Commission	ı Filers)
W	Vilkerson, D	Denise V. (Mrs.)				00087899	
	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
04	4/05/2024	Sexton, Julie					\$94.00
	I	6 Contributor address; City; St	tate; Zip Code	1	1		
		Arlington, TX 76013					
• Pi	rincipal occu	pation / Job title (See Instructions	<u></u>	9 Employer (See Instructions	$\frac{1}{2}$		
	lot Employe		<i>,</i>)	Not Employed	5)		
					—	· · · · · · · · · · · · · · · · · · ·	
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	<u>ቀ</u> 1 በበ
02	2/26/2024	Shaw, Barbara					\$1.00
		Contributor address; City; St	ate; Zip Code				
		Boxford, MA 01921					
Pi	rincipal occu	pation / Job title (See Instructions	<i>د)</i>	Employer (See Instructions	<u>ار</u> د)		
	lot employe			Not employed	-,		
	Date	Full name of contributor	out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	2/27/2024	Sibley, Carol		,		Amount of Contraction (1)	\$1.00
	LILII	Contributor address; City; St	tata: Zin Code				* -·
			ale, zip couc				
		Seattle, WA 98103					
Pr	rincipal occu	pation / Job title (See Instructions		Employer (See Instructions	s)		
N	lot Employe	эd		Not Employed			
Di	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
03	3/01/2024	Sibley, Carol					\$2.00
	I	Contributor address; City; St	tate; Zip Code		1		
			-				
		Seattle, WA 98103					
		pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
N	lot Employe	;d		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
06	6/28/2024	Siddiqui, Aftab					\$94.00
	I	Contributor address; City; St	tate; Zip Code]		
		Arlington, TX 76002			Ĺ		
		pation / Job title (See Instructions	<i>;</i>)	Employer (See Instructions	5)		
	Planner			American Airlines			

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 42/50 Rpt: 45/80	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		Denise V. (Mrs.)				00087899	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/29/2024	Simmons, Campaign to Elect A	Alis				\$250.00
		6 Contributor address; City; State; Z	Zip Code				
			r.				
		Arlington, TX 76016					
8	Principal occu	pation / Job title (See Instructions)	٤	9 Employer (See Instructions	5)		
	Campaign F						
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/27/2024	Slater, Sheila					\$1.06
	v_ ,	Contributor address; City; State; Z	Zin Code				T = - T -
		CUITITIDUTO audiess, City, State, 2					
		New York, NY 10025					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe	,		Not Employed	,		
⊨	Date		out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	06/26/2024	Smith, Jason	שליים ארכיים	/			\$250.00
	0012012024		7 ' - 0 - 4 -				φ230.00
		Contributor address; City; State; Z	Zip Code				
		Fort Worth, TX 76104					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נ)		
	Attorney			Law Offices of Jason Sn		ı	
╞					1		
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀጋር በበ
	06/01/2024	Snyder, Julie					\$25.00
		Contributor address; City; State; Z	Zip Code				
		Hurst, TX 76054					
<u> </u>	Dringing occu			Employer (See Instructions	<u> </u>		
	Teacher	pation / Job title (See Instructions)		Employer (See Instructions Covenant Christian	5)		
			l		_		
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2024	Snyder, Julie					\$25.00
	Contributor address; City; State; Zip Code						
		Hurst, TX 76054					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Teacher			Covenant Christian			
					_		

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 43/50 Rpt: 46/80
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	enise V. (Mrs.)		00087899
4 Date	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)		7 Amount of Contribution (\$)
02/25/2024			\$94.
	6 Contributor address; City; State; Zip Code		
	Arlington, TX 76013		
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions))
Education		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/28/2024	Stewart, David		\$25.
	Arlington, TX 76016		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))
Not Employe		Not Employed	
Date			Amount of Contribution (\$)
06/26/2024	Full name of contributor out-of-state PAC (ID#: Stringer, Sara)	Amount of Contribution (\$) \$200.
00/20/2024	-		φ200.
	Contributor address; City; State; Zip Code		
	Mesquite, TX 75181		
Dringing occur		Employer (See Instructions)	
School Coun	pation / Job title (See Instructions)	Employer (See Instructions))
		Forney ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/26/2024	Summers-Ables, Joy		\$50.
	Contributor address; City; State; Zip Code		
	Midwest City, OK 73110	<u> </u>	
	pation / Job title (See Instructions)	Employer (See Instructions))
Librarian		OUHSC	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/28/2024	Syed, Hisham		\$25.
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))
not employed	b	self	

			1
The Instru	ction Guide explains how to comple	te this form.	1 Total pages Schedule A1: Sch: 44/50 Rpt: 47/80
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Wilkerson, [Denise V. (Mrs.)		00087899
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of Contribution (\$)
06/05/2024	Tang, Serena		\$250.00
	6 Contributor address; City; State; Zip Code		
	Sitka, AK 99835	Contractor (Cool potruction	>
8 Principal occu Trial Attorne	upation / Job title (See Instructions)	9 Employer (See Instruction Federal Maritime Com	
Date	_	PAC (ID#:)	Amount of Contribution (\$)
03/12/2024			\$25.00
	Contributor address; City; State; Zip Code		
	Bedford, TX 76021		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	lis)
Not Employ		Not Employed	
Date	Full name of contributor out-of-state		Amount of Contribution (\$)
04/12/2024	Taylor, Robert	· ΓΑΟ (iDπ)	\$25.00
	Bedford, TX 76021		
•	upation / Job title (See Instructions)	Employer (See Instruction	ns)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of Contribution (\$)
05/12/2024	Taylor, Robert		\$25.00
	Contributor address; City; State; Zip Code		
	Bedford, TX 76021		
Drincinal occi	upation / Job title (See Instructions)	Employer (See Instruction	
Not Employ		Not Employed	(כו
Date			Amount of Contribution (\$)
06/12/2024	Full name of contributor out-of-state Taylor, Robert	• PAC (ID#:)	Amount of Contribution (\$) \$25.00
001121202 1	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Bedford, TX 76021		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	ls)
Not Employ	ed	Not Employed	
		I	

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/50 Rpt: 48/80	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		Denise V. (Mrs.)			00087899	11 110.07
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/17/2024	Thompson, Glenda				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Arlington, TX 76013				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not employe	:d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	05/18/2024	Thompson, Glenda				\$50.00
		Contributor address; City; State; Zip Code		·		
		Arlington, TX 76013				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not employe	ed .	Not employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	06/30/2024	Thompson, Glenda				\$94.00
		Contributor address; City; State; Zip Code		-		
		Arlington, TX 76013				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not employe	ed .	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	06/17/2024	Turner, Lisa				\$250.00
		Contributor address; City; State; Zip Code				
		Grand Prairie, TX 75054				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	consultant	1	self			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	01/19/2024	Underkofler, Christy				\$6.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76010				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Contract Red		Pridestaff	•		
_						

	The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 46/50 Rpt: 49/80	
2	FILER NAME		3 Filer ID (Ethics Commission Filers)	
		Denise V. (Mrs.)		00087899
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	02/19/2024	Underkofler, Christy		\$6.00
		6 Contributor address; City; State; Zip Code		
		Arlington, TX 76010		
8			9 Employer (See Instructions	3)
	Contract Red	cruiter	Pridestaff	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/19/2024	Underkofler, Christy		\$6.00
		Contributor address; City; State; Zip Code		
		Arlington, TX 76010		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
	Contract Red	cruiter	Pridestaff	
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	04/19/2024	Underkofler, Christy		\$6.00
		Contributor address; City; State; Zip Code		
		Arlington, TX 76010		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
	Contract Red	cruiter	Pridestaff	
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/19/2024	Underkofler, Christy		\$6.00
		Contributor address; City; State; Zip Code		
		Arlington, TX 76010		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
	Contract Red	cruiter	Pridestaff	
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/19/2024	Underkofler, Christy		\$6.00
		Contributor address; City; State; Zip Code		
		Arlington, TX 76010		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
	Contract Red	cruiter	Pridestaff	
┢				

	The Instru	ction Guide explains how to complete t	1	Total pages Schedule A1: Sch: 47/50 Rpt: 50/80		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Wilkerson, D	enise V. (Mrs.)			00087899	,
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	05/21/2024	Upton, Mark			\$94.00	
		6 Contributor address; City; State; Zip Code				
_		Arlington, TX 76012		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instruction	าร)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	01/23/2024	Vasquez, Celina				\$25.00
		Contributor address; City; State; Zip Code		"		
		Arlington, TX 76016				
		pation / Job title (See Instructions)	Employer (See Instruction	าร)		
	Higher Educ	ation	UT Arlington			
	Date	Full name of contributor out-of-state PAC		Amount of Contribution (\$)		
	03/31/2024	Villarreal, Becky				\$5.00
		Contributor address; City; State; Zip Code	"			
		Cedar Park, TX 78613	i			
		pation / Job title (See Instructions)	Employer (See Instruction	าร)		
	Prof		ACC			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	06/29/2024	Vinson, John				\$100.00
		Contributor address; City; State; Zip Code		"		
		ARLINGTON, TX 76013				
		pation / Job title (See Instructions)	Employer (See Instruction	าร)		
	Not Employe	20	Not Employed			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	06/26/2024	Waldrop, Jeff				\$94.00
		Contributor address; City; State; Zip Code		"		
		Arlington, TX 76013				
		pation / Job title (See Instructions)	าร)			
	Teacher		Arlington ISD			

	The Instru	ction Guide explains how to complete thi	1	Total pages Schedule A1: Sch: 48/50 Rpt: 51/80		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
		Denise V. (Mrs.)			00087899	,
4	Date	5 Full name of contributor Out-of-state PAC (II	ID#:)	7	Amount of Contribution (\$)	
	03/01/2024	Watkins, Howard				\$10.00
		6 Contributor address; City; State; Zip Code]			
		Long Beach, CA 90815				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
ľ	Not Employe		Not Employed	-)		
	Date		ID#:)	Т	Amount of Contribution (\$)	
	02/29/2024	Webster, Mary E.	D#)			\$250.00
	02/23/2024					\$200.00
		Contributor address, City, State, Zip Code				
		Arlington, TX 76016				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Retired			
╞	Date	Full name of contributor Out-of-state PAC (II	ID#:)	Τ	Amount of Contribution (\$)	
	02/29/2024	Wesstrom, Jill				\$50.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76013				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	retired		retired			
	Date	Full name of contributor Out-of-state PAC (II	ID#:)	Γ	Amount of Contribution (\$)	
	06/26/2024	Wikoff, Melina				\$50.00
		Contributor address; City; State; Zip Code		Ϊ		
⊢	<u></u>	Arlington, TX 76011		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions Melina Wikoff	S)		
	Self-employe					
	Date	Full name of contributor out-of-state PAC (II	ID#:)		Amount of Contribution (\$)	÷100.00
	05/23/2024	Wilhelm, Franya				\$100.00
		Contributor address; City; State; Zip Code				
		Arlington, TX 76012				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ດ</u>)		
	Not Employe		Not Employed	5)		
┝						

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission 00087899) 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)	
Wilkerson, Denise V. (Mrs.) 00087899	
Wilkerson, Denise V. (Mrs.) 00087899	n Filers)
4 Date 5 Full name of contributor 1 out of state DAC (ID4) 1 7 Amount of Contribution (\$	
06/23/2024 Wilhelm, Franya	\$25.00
6 Contributor address; City; State; Zip Code	
Arlington, TX 76012	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
06/30/2024 Wilhelm, Franya	\$100.00
	Ψ100.00
Contributor address; City; State; Zip Code	
Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
06/26/2024 Wilkerson, Dean	\$25.00
Contributor address; City; State; Zip Code	
Dallas, TX 75243	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Engineer LM Aero	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
06/28/2024 Wilkerson, Denise	\$94.00
Contributor address; City; State; Zip Code	
Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 Wolfe, katherine Amount of Contribution (\$)	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 Wolfe, katherine Contributor address; City; State; Zip Code Amount of Contribution (\$)	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 Wolfe, katherine Contributor address; City; State; Zip Code Amount of Contribution (\$) Ashland, OR 97520 Ashland, OR 97520	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 Wolfe, katherine Contributor address; City; State; Zip Code Amount of Contribution (\$) Ashland, OR 97520 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$1.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 02/27/2024 Wolfe, katherine Contributor address; City; State; Zip Code Ashland, OR 97520 Ashland, OR 97520 Attemployer (See Instructions)	\$1.00

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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 50/50 Rpt: 53/80		
2	FILER NAME		3	Filer ID (Ethics Commission	ı Filers)	
	Wilkerson, D	Denise V. (Mrs.)			00087899	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/22/2024	Wright, Adam				\$25.00
		6 Contributor address; City; State; Zip Code		1		
_		Arlington, TX 76012		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe		Not Employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±: 00
	05/31/2024					\$1.00
		Contributor address; City; State; Zip Code				
		Hilo, HI 96720				
	Bringinal occu	ipation / Job title (See Instructions)	Employor (See Instructions	<u> </u>		
	caterer		Employer (See Instructions self	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	фо <u>г</u> 00
	06/28/2024	Zamorano, Wanda				\$25.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75063				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	03/01/2024	graham, suzanne				\$2.00
	•	Contributor address; City; State; Zip Code		ł		-
		Albuquerque, NM 87107				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	;d	Not employed			
	Date	te Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	
	05/31/2024	von Briesen, Hans				\$1.38
		Contributor address; City; State; Zip Code		1		
		Santa Fe, NM 87501				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
1						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 54/80									
2 FILER NAME Wilkerson, D	: Denise V. (Mrs.)	Filer ID (Ethics Commission Filers) 00087899									
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$									
5 Date 05/29/2024	 Full name of contributor out-of-state PAC (ID#: Jamie, Polancic Contributor address; City; State; Zip Code Los Angeles, CA 90064 	 Amount of contribution (\$) In-kind contribution description \$400.00 Artwork for postcards & event Check if travel outside of Texas. Complete Schedule T. 									
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON									
Artist		Self									
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)								
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)								
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)											
Date 06/17/2024	Full name of contributor out-of-state PAC (ID#: Linda, Dipert Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$1,122.19 Food and nonalcoholic beverages at event.								
	Arlington, TX 76013		Check if travel outside of Texas. Complete Schedule T.								
Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON none	-JUDICIAL) (See instructions)								
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)								
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										
Date 05/22/2024	Full name of contributor out-of-state PAC (ID#: Mack, Donna Contributor address; City; State; Zip Code Pantego, TX 76013)	Amount of In-kind contribution contribution (\$) description \$25.00 Facility Rental for event								
Principal occu Consultant	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Self	Check if travel outside of Texas. Complete Schedule T. JUDICIAL) (See instructions)								
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)								
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/2 Rpt: 55/80				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Denise V. (Mrs.)	00087899				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 01/19/2024	 6 Full name of contributor out-of-state PAC (ID#: Texas Classroom Teachers Association 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$1.59 Mailing Labels			
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I				
Date 05/31/2024	Full name of contributor out-of-state PAC (ID#: Villerreal, Jordan Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$4,000.00 I Campaign Consulting - field direction, turf cutting, advice on hires			
	Denton, TX 76208		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON				
Political Stra		Self				
	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 1/24 Rpt: 56/80		Wilkerson, Denise V. (Mrs.)					00087899		
4	Date	5	Payee name							
	04/24/2024									
6	Amount (\$)	ount (\$) 7 Payee address; City; State; Zip Code								
	\$25.00		366 Summer Street							
			Somerville, MA 02114							
8	PURPOSE	(a)			(h)	Description				
ľ	OF	(4)	Category (See Categories listed at the top of this s Contributions/Donations Made By	chedule)	(5)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Com	mittee		Check if Austin	, тх,	ficeholder living expense		
						Donation to N	/lus	slim Democratic Caucus		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held		
	Date		Payee name							
	01/16/2024		ActBlue Technical Services							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$135.00 366 Summer Street									
			Somerville, MA 02114							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Com	mittoo				ide of Texas. Complete Schedule T. , officeholder living expense		
			Candidate/Officenoide/Political Com	millee				tic Women's Convention fee		
						Texas Demo	ora			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ıght			Office held		
	Date		Payee name							
	01/14/2024		ActBlue Technical Services							
	Amount (\$)	-		e; Zip Co	nde					
	\$0.99		366 Summer Street	.c, zip cc	Juc					
	40.00									
			Somerville, MA 02114							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	ou +- ·	ide of Toyoo, Complete Schedule 7		
	EXPENDITURE		Solicitation/Fundraising Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Processing F				
						5				
	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	ıght			Office held		
	expenditure to benefit C/OF				-					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Fees Office Overhead/Rental Expense Topol/Rental Expense <thtp> <thtp> Topol/Renta</thtp></thtp>			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/24 Rpt: 57/80		Wilkerson, Denise V. (Mrs.)				00087899		
4	Date 01/14/2024	5	Payee name ActBlue Technical Services						
6	Amount (\$)	7		Zin Co	10				
0	\$0.79								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(alube	(b) Description				
OF EXPENDITURE Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held		
	Date		Payee name						
	01/21/2024 ActBlue Technical Services								
	Amount (\$) Payee address; City; State; Zip Code								
	\$0.99		366 Summer Street Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held		
⊨	Date	Γ	Payee name						
	06/21/2024		ActBlue Technical Services						
	Amount (\$) \$0.24		Payee address;City;State;366 Summer Street	Zip Co	le				
			Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O)ffice sou	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 3/24 Rpt: 58/80		Wilkerson, Denise V. (Mrs.)				00087899		
4	Date	5	Payee name						
	01/21/2024		ActBlue Technical Services						
6	Amount (\$)	7		; Zip Co	de				
	\$0.40		366 Summer Street						
			Somerville, MA 02114						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense	cuuic)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE			5 1			officeholder living expense		
					fees				
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt		Office held		
	Date		Payee name						
	01/21/2024 ActBlue Technical Services								
	Amount (\$) Payee address; City; State; Zip Code								
	\$0.40 366 Summer Street								
			Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	01/28/2024		ActBlue Technical Services						
-	Amount (\$)		Payee address; City; State;	; Zip Co	de				
	\$0.20		366 Summer Street	-					
			Somerville, MA 02114						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description	outoi	do of Toylog, Complete Schedule T		
	EXPENDITURE		Solicitation/Fundraising Expense				de of Texas. Complete Schedule T. officeholder living expense		
-	Complete ONLY if direct	L(Candidate/Officeholder name C	Office sou	ght		Office held		
	expenditure to benefit C/Oł				<u> </u>				
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense tegal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/V	verhea xpense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 4/24 Rpt: 59/80		Wilkerson, Denise V. (Mrs.)					00087899	
4	Date 06/28/2024	5	Payee name ActBlue Technical Services						
6	Amount (\$)	7	Pavee address: City: State	e [.] Zin Co	aha				
U	\$0.99	7 Payee address; City; State; Zip Code \$0.99 366 Summer Street Somerville, MA 02114							
8	PURPOSE	(a)	Cotogon		(h)	Description			
U	OF	(a)	Category (See Categories listed at the top of this so Solicitation/Fundraising Expense	chedule)	(5)	Check if travel		ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	01/28/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State	e; Zip Co	ode				
	\$0.99		366 Summer Street Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Solicitation/Fundraising Expense	chedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	01/04/2024		ActBlue Technical Services						
	Amount (\$) \$0.99		Payee address; City; State 366 Summer Street	e; Zip Co	ode				
			Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Solicitation/Fundraising Expense	chedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · ·			2	Filer ID (Ethics Commission Filers)		
-	Sch: 5/24 Rpt: 60/80	2	Wilkerson, Denise V. (Mrs.)				00087899		
4	Date 02/04/2024	5	Payee name ActBlue Technical Services						
6	Amount (\$)	7	Payee address; City; State;	Zin Co	de				
Ū	Amount (\$) Payee address; City; State; Zip Code \$0.99 \$0.99 Somerville, MA 02114								
8	PURPOSE	(a)	Catagony		(b) Description				
U	OF	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)	Check if travel		ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	02/11/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$1.39		366 Summer Street Somerville, MA 02114						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	02/18/2024		ActBlue Technical Services						
	Amount (\$) \$2.77		Payee address; City; State; 366 Summer Street	Zip Co	de				
			Somerville, MA 02114						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fees									
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	se s/Contract Labor		Travel in District Travel Out of District	oment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	Ethics Commission Filers)
	Sch: 6/24 Rpt: 61/80		Wilkerson, Denise V. (Mrs.)					00087899	
4	Date	5	Payee name						
	02/25/2024		ActBlue Technical Services						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode				
	\$4.16		366 Summer Street						
			Somerville, MA 02114						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/Fundraising Expense	,			outsi	de of Texas. Complete	e Schedule T.
	EXPENDITORE						, TX,	officeholder living exp	bense
						fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	
	Date		Payee name						
	03/03/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State	; Zip Co	ode				
	\$44.31		366 Summer Street	•					
			Somerville, MA 02114						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)	(b)	Description Check if travel	outsi	de of Texas. Complete	e Schedule T.
	EXPENDITURE					Check if Austin	, TX,	officeholder living exp	pense
						fees			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office held	
	expenditure to benefit C/OI	-1							
	Date		Payee name						
	03/05/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State	; Zip Co	ode				
	\$13.83		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/Fundraising Expense			Check if travel	outsi	de of Texas. Complete	e Schedule T.
	EXPENDITORE						, TX,	officeholder living exp	pense
						fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	
	onponditore to benefit 0/01	•							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	, xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 7/24 Rpt: 62/80		Wilkerson, Denise V. (Mrs.)				00087899		
4	Date	5	Payee name						
	03/10/2024		ActBlue Technical Services						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode				
	\$7.91		366 Summer Street						
			Somerville, MA 02114						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense	,	Check if travel	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE					I, TX	, officeholder living expense		
					fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ight		Office held		
	Date		Payee name						
	03/17/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State;	Zip Co	ode				
	\$3.17		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T.		
						ι, TΧ,	, officeholder living expense		
					fees				
					a la t				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	igni		Office held		
_		i –							
	Date		Payee name						
	03/24/2024		ActBlue Technical Services						
	Amount (\$)			Zip Co	ode				
	\$23.16		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T.		
						i, TX,	, officeholder living expense		
					fees				
_									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ight		Office held		
		-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense tegal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	, xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 8/24 Rpt: 63/80		Wilkerson, Denise V. (Mrs.)				00087899		
4	Date	5	Payee name						
	03/31/2024		ActBlue Technical Services						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$0.20		366 Summer Street						
			Somerville, MA 02114						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T.		
					fees	, TX,	, officeholder living expense		
					1663				
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	abt		Office held		
5	expenditure to benefit C/O				gin				
	Date		Payee name						
	04/07/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$4.71		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					fees		,		
	Complete ONLY if direct	. (Candidate/Officeholder name C	Office sou	ght		Office held		
	expenditure to benefit C/OI	Η							
	Date		Payee name						
	04/14/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$13.05		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T.		
	-				fees	, TX,	, officeholder living expense		
					1663				
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name C	Office sou	abt		Office held		
	expenditure to benefit C/OI			-mec 300	9				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Service	ge Expense ⁄Iemorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 9/24 Rpt: 64/80		Wilkerson, Denise V.	(Mrs.)				00087899
4	Date	5	Payee name					
	04/21/2024		ActBlue Technical Se	ervices				
6	Amount (\$)	7	Payee address; Cit	y; State;	Zip Co	de		
	\$5.19		366 Summer Street					
			Somerville, MA 0211	4				
8	PURPOSE	(a)	Category (See Categories	listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE		Solicitation/Fundraisi		,	Check if travel		ide of Texas. Complete Schedule T.
							η, TΧ,	, officeholder living expense
						fees		
9	Complete ONLY if direct		Candidate/Officeholder n	2000	Office sou			Office held
9	expenditure to benefit C/OI			anie C	JIIICE SOU	jin		Once neu
	Date		Payee name					
	06/30/2024		ActBlue Technical Se	ervices				
	Amount (\$)		Payee address; Cit	v: State;	Zip Co	de		
	\$137.75		366 Summer Street	, ,				
			Somerville, MA 0211	4				
	PURPOSE	(a)	Category (See Categories	listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE		Solicitation/Fundraisi	ng Expense				ide of Texas. Complete Schedule T.
						Processing F		, officeholder living expense
						FIDCESSING F	ee	
	Complete ONLY if direct		Candidate/Officeholder n	ame C	Office sou	iht		Office held
	expenditure to benefit C/OI					,		
⊨	Date		Payee name					
	06/23/2024		ActBlue Technical Se	ervices				
	Amount (\$)		Payee address; Cit	v: State;	Zip Co	de		
	\$127.47		366 Summer Street		•			
			Somerville, MA 0211	4				
	PURPOSE	(a)	Category (See Categories	listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE		Solicitation/Fundraisi	ng Expense				ide of Texas. Complete Schedule T.
								, officeholder living expense
						Processing F	ee	
	Complete ONLY if direct	Ļ	Candidate/Officeholder n	ame C	Office sou	tht		Office held
	expenditure to benefit C/OI				2000 3000	j		Office field

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense tegal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/V	erhead kpense xpense Vages/	e Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 10/24 Rpt: 65/80		Wilkerson, Denise V. (Mrs.)					00087899	
4	Date	5	Payee name						
	06/16/2024		ActBlue Technical Services						
6	Amount (\$)	7	Payee address; City; Stat	te; Zip Co	ode				
	\$15.35		366 Summer Street	· •					
			Somerville, MA 02114						
8	PURPOSE	(a)			(h)	Description			
ľ	OF	(4)	Category (See Categories listed at the top of this s Solicitation/Fundraising Expense	chedule)	(5)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense	
						Processing F	ee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held	
	Date		Payee name						
	06/09/2024		ActBlue Technical Services						
	Amount (\$)		Payee address; City; Stat	te; Zip Co	ode				
	\$31.22		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/Fundraising Expense					ide of Texas. Complete Schedule T.	
						Processing F		, officeholder living expense	
						Processing P	ee		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held	
	expenditure to benefit C/OF		candidate/Oncerioider name	Onice Sou	igin			Once held	
_	Data	<u> </u>	D						
	Date 06/02/2024		Payee name ActBlue Technical Services						
				7:0.0					
	Amount (\$)			te; Zip Co	ode				
	\$16.69		366 Summer Street						
			Somerville, MA 02114						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/Fundraising Expense	,		Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE							, officeholder living expense	
						Processing F	ee		
					Ļ				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held	
		-							
1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen hittee Legal Services The Instruction Guide e	Office Polling se Printin Salarie	Overhea Expens g Exper s/Wage	se s/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense
1	Total pages Schedule F1:	2 F					3	Filer ID (F	Ethics Commission Filers)
-	Sch: 11/24 Rpt: 66/80		Vilkerson, Denise V. (Mrs.)					00087899	
4	Date 05/26/2024		ayee name ctBlue Technical Services						
6	Amount (\$) \$20.96	7 Payee address; City; State; Zip Code \$20.96 366 Summer Street Somerville, MA 02114							
8	PURPOSE OF EXPENDITURE	OF Solicitation/Eundraising Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office held	
	Date	F	ayee name						
	05/19/2024	A	ctBlue Technical Services						
	Amount (\$) \$4.00	3	ayee address; City; 66 Summer Street comerville, MA 02114	State; Zip	Code				
	PURPOSE OF EXPENDITURE	(a) (ategory (See Categories listed at the top colicitation/Fundraising Expense		(b)		n, TX,	de of Texas. Complet officeholder living ex	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office held	
	Date 05/12/2024		ayee name .ctBlue Technical Services						
	Amount (\$) \$5.93		ayee address; City; 66 Summer Street	State; Zip	Code				
		S	omerville, MA 02114						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top colicitation/Fundraising Expense		(b)		n, TX,	de of Texas. Complet officeholder living ex	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office held	

			EXPENDITURE (CATEGORI	ES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	pense	Loan Repay Office Overh Polling Expe Printing Exp Salaries/Wa	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
-	Total names Cabadula E1.	0 5		e explains no		piete this form.	1	Filer ID	(Ethios Commission Filoro)
1	Total pages Schedule F1: Sch: 12/24 Rpt: 67/80		ER NAME ilkerson, Denise V. (Mrs.)				3	Filer ID 00087899	(Ethics Commission Filers)
4	Date 05/05/2024		yee name tBlue Technical Services						
6	Amount (\$)		yee address; City;	State;	Zip Cod	e			
	\$9.88		6 Summer Street omerville, MA 02114						
8	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the to dicitation/Fundraising Exper		dule) (ı, ТХ,	ide of Texas. Comp , officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	Off	fice soug	nt		Office he	ld
	Date	Pa	yee name						
	04/28/2024	A	tBlue Technical Services						
	Amount (\$)	Pa	yee address; City;	State;	Zip Cod	9			
	\$0.20		6 Summer Street omerville, MA 02114						
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the to licitation/Fundraising Exper		dule) (ı, ТХ,	ide of Texas. Com , officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	Of	fice soug	nt		Office he	ld
	Date	Pa	yee name						
	01/16/2024		ianz Travel Insurance						
	Amount (\$)	Pa	yee address; City;	State;	Zip Cod	9			
	\$30.75		Mid America Plaza, Suite 20	00					
			akbrook Terrance, IL 60181						
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the to avel Out of District	op of this sched	dule) (ı, ТХ,	ide of Texas. Comp , officeholder living e TDW trip	
	Complete ONLY if direct expenditure to benefit C/OF		didate/Officeholder name	Of	fice soug	nt		Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 13/24 Rpt: 68/80	Wilkerson, Denise V. (Mrs.)	00087899							
4	Date 04/01/2024	Payee name Comark Direct								
6	Amount (\$) \$226.24 Fort Worth, TX 76104 7 Payee address; City; State; Zip Code 614 Hemphill St Fort Worth, TX 76104									
8	PURPOSE	i								
o	OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense iness cards/flyers							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/25/2024	Digital Marketing & Print Solutions								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$718.75	3305 Wiley Post Rd Carrollton, TX 75006								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/28/2024	Evite								
	Amount (\$) \$73.58	Payee address;City;State;ZipCode310 East Colorado Street								
		Glendale, CA 91205								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense D Fundraiser							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp tee Legal Services The Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:	2 FI	LER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 14/24 Rpt: 69/80		Wilkerson, Denise V. (Mrs.) 00087899								
4	Date	5 Pa	iyee name								
	06/10/2024	Fa	acebook								
6	Amount (\$)	7 Pa	yee address; City;	State;	Zip Co	de					
	\$10.00	1	Hacker Way								
		М	enlo Park, CA 94025								
8	PURPOSE	(a) Ca	ategory (See Categories listed at the to	op of this sch	edule)	(b) Description					
	OF EXPENDITURE	A	lvertising Expense					ide of Texas. Comp			
	-					Facebook Ac		, officeholder living	expense		
						Facebook At	15				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	C) Office souç	ght		Office hel	ld		
	Date	Pa	iyee name								
	06/03/2024	Fa	acebook								
	Amount (\$)	Pa	yee address; City;	State:	Zip Co	de					
	\$1.69		Hacker Way		•						
	1										
		М	enlo Park, CA 94025								
	PURPOSE OF	(a) Ca	ategory (See Categories listed at the to	op of this sch	edule)	(b) Description					
	EXPENDITURE	A	lvertising Expense				eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense				
						Facebook Ac		, onicentitider inving (expense		
							.0				
	Complete ONLY if direct	Car	didate/Officeholder name	C	Office sou	ght		Office hel	ld		
	expenditure to benefit C/OI										
	Date	P	iyee name								
	05/15/2024		acebook								
	Amount (\$)		yee address; City;	State [.]	Zip Co	he					
	\$10.00		Hacker Way	State,							
	¢10.00	-	nacker way								
		М	enlo Park, CA 94025								
	PURPOSE OF		ategory (See Categories listed at the to	op of this sch	edule)	(b) Description					
	EXPENDITURE	A	lvertising Expense					ide of Texas. Comp , officeholder living (
						Facebook Ac		, onicendider living (expense		
						I GOODON AL	•				
	Complete ONLY if direct	Car	didate/Officeholder name		Office sou	tht		Office hel	ld		
	expenditure to benefit C/OI			C		gin					
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 15/24 Rpt: 70/80	Wilkerson, Denise V. (Mrs.)	00087899						
4	Date 05/14/2024	Payee name Facebook							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$10.00	1 Hacker Way Menlo Park, CA 94025							
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense S						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/24/2024	GDBH LLC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,000.00	6110 Bay Hill Dr Arlington, TX 76018							
	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of this schedule) Consulting Expense Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense tion, Facebook & Website development						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/03/2024	Google							
	Amount (\$) \$46.05	Payee address; City; State; Zip Code 1600 Amphitheater Parkway							
		Mountain View, CA 94043							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)							
-	Sch: 16/24 Rpt: 71/80	Wilkerson, Denise V. (Mrs.)	00087899							
4	Date 05/01/2024	5 Payee name Google								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
Ū	\$46.05	1600 Amphitheater Parkway Mountain View, CA 94043								
8	PURPOSE	(a) Cotogony (a)								
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Google G Suite 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/01/2024	Google								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$46.05	1600 Amphitheater Parkway Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense Ə							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/01/2024	Google								
	Amount (\$) \$46.05	Payee address; City; State; Zip Code 1600 Amphitheater Parkway								
		Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense C							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 17/24 Rpt: 72/80	Wilkerson, Denise V. (Mrs.)	00087899							
4	Date 02/01/2024	Payee name Google								
6	Amount (\$) \$46.05	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043								
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Google G Suite									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/02/2024	Google								
	Amount (\$) \$43.02	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense ie							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/26/2024	HEB Chamber of Commerce								
	Amount (\$) \$403.00	Payee address; City; State; Zip Code 201 E. Martin Dr								
		Bedford, TX 76021								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ommerce Membership							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 18/24 Rpt: 73/80		Wilkerson, Denise V. (Mrs.)				00087899			
4	Date	5	Payee name							
	02/20/2024		Jay Jay Cafe							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$36.79		1001 S. Bowen RD							
			Arlington, TX 76013							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					Presidents L	ay	Coffee with the Candidate food			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	03/25/2024		Lee Candidate Services							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$1,000.00		25 Broadway, 12th Floor	p 00						
	¢1,000.00		20 Broadway, 12411 1001							
			New York, NY 10004							
	PURPOSE OF		Category (See Categories listed at the top of this sch	edule)	(b) Description	outoi	ida of Tayloo, Complete Cebedule T			
	EXPENDITURE		Consulting Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
							lign guidance, website updates,			
					messaging, c					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date		Payee name							
	01/25/2024		Lenier Consulting							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$500.00		1321 Upland Drive							
			PMB 19714							
			Houston, TX 77043							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description					
	OF		Consulting Expense	culley	·	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin	, TX	, officeholder living expense			
					Campaign Co events	ons	sulting services - messaging and			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel OUt of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)								
1	Total pages Sabadula E1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
T	Total pages Schedule F1:									
	Sch: 19/24 Rpt: 74/80	Wilkerson, Denise V. (Mrs.) 00087899								
4	Date	5 Payee name								
	01/22/2024	Lenier Consulting								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
-	\$56.29	1321 Upland Drive								
	\$00120	PMB 19714								
		Houston, TX 77043								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		Reimburse consultant for event food & beverage								
		expenses								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	H								
	Date	Payee name								
	01/18/2024	Lenier Consulting								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$500.00	1321 Upland Drive								
		PMB 19714								
		Houston, TX 77043								
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF	Consulting Expense Consulting Expense								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Consulting Services - help with reporting and								
		messaging								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	H								
	Date	Deves nome								
	06/24/2024	Payee name Mail Chimp								
		·								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$63.96	675 Ponce de Leon Ave NE								
		Suite 5000								
		Atlanta, GA 30308								
	PURPOSE									
	OF									
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
		Email marketing								
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/Oł	Ū Ū								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	pense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	aymen rhead bense pense ages/	t/Reimbursement /Rental Expense Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 20/24 Rpt: 75/80			Denise V. (Mrs.)						00087899	
4	Date	5	Payee name								
	05/22/2024		Mail Chimp								
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de				
	\$63.96		675 Ponce c	le Leon Ave NE							
			Suite 5000								
			Atlanta, GA	20208							
_		<u> </u>				r					
8	PURPOSE OF			e Categories listed at the t	top of this sch	edule)	(b)	Description		- of Toyoo Com	-I-t- Cabadula T
	EXPENDITURE		Advertising I	Expense			ļ			de of Texas. Comp officeholder living	
							I	Email Market		Uniceriolaer	CAPCINC
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office souç	ght			Office he	eld
	Date	Γ	Payee name								
	04/22/2024		Mail Chimp								
Amount (\$) Payee address; City; State; Zip Code											
	\$63.96			le Leon Ave NE	Cu.,	,	uc				
	ψ00.00										
			Suite 5000								
			Atlanta, GA	30308							
	PURPOSE OF EXPENDITURE		Category _{(Se} Advertising I	e Categories listed at the t Expense	top of this sch	iedule)	(b)			de of Texas. Com	
							I	Email Service		officeholder living	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld
	Date	Ē	Payee name								
	03/22/2024		Mail Chimp								
	Amount (\$)	┢	Payee addres	s; City;	State;	; Zip Co	de				
	\$63.96		-	le Leon Ave NE		· ·	-				
	+ +		Suite 5000								
				~~~~							
		L	Atlanta, GA	30308		r					
	PURPOSE OF			e Categories listed at the t	top of this sch	edule)	(b)	Description			=
	EXPENDITURE		Advertising I	Expense						de of Texas. Comp officeholder living	
							I	Email Service		Unicendider inving	expense
	Operation ONUNC is also at	Ľ				24	1- 4			Office he	1-1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	enolder name	Ĺ	Office sou	gnt			Office he	90

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense         Polling Expense           Gift/Awards/Memorials Expense         Printing Expense						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics Commission Filers)		
	Sch: 21/24 Rpt: 76/80			Denise V. (Mrs.)					-	00087899			
4	Date	5	Payee name										
	02/22/2024		Mail Chimp										
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de						
	\$63.96		675 Ponce	de Leon Ave NE									
			Suite 5000										
				20200									
_			Atlanta, GA			r							
8	PURPOSE OF	(a)		ee Categories listed at the	e top of this sch	edule)	(b)	Description					
	EXPENDITURE		Advertising	Expense						de of Texas. Com officeholder living			
								Email service		oniceriolder living	expense		
									•				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	C	Dffice sou	ght			Office he	eld		
	Date		Payee name										
	01/22/2024		Mail Chimp										
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de						
	\$63.96			de Leon Ave NE		· •							
	+00100		Suite 5000										
			Atlanta, GA	30308									
	PURPOSE OF	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b)	Description					
	EXPENDITURE		Advertising	Expense						de of Texas. Com			
								Email service		officeholder living	expense		
	Complete ONLY if direct		Candidate/Off	iceholder name		Office sour	aht			Office he			
	expenditure to benefit C/OI		Sandidate/On			Jince Sou	JIII			Onice ne			
		_											
	Date		Payee name										
	04/08/2024		Precision P	ress									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de						
	\$251.14		900 W Mair	n St									
			Arlington, T	X 76013									
	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Advertising		-	-		Check if travel	outsi	de of Texas. Com	plete Schedule T.		
			-						, TX,	officeholder living	expense		
								Postcards					
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld		
	expenditure to benefit C/OI	-1											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repaymen Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	at/Reinbursement /Rental Expense       Solicitation/Fundraising Expense         Transportation Equipment & Related Expense         Travel in District         e       Travel Out of District         Contract Labor       OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 22/24 Rpt: 77/80	Wilkerson, Denise V. (Mrs.)	00087899							
4	Date 02/12/2024	Payee name Spring Hill Suites								
6	Amount (\$)	Payee address; City; State; Zip Code								
	\$168.29	4501 S I-35 Frontage Rd Austin, TX 78744								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Texas Democratic Women's Convention										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/12/2024	Spring Hill Suites								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$151.71	4501 S I-35 Frontage Rd Austin, TX 78744								
	PURPOSE OF EXPENDITURE	Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texas Democratic Women's Convention							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/05/2024	Square Space								
	Amount (\$) \$163.74	Payee address; City; State; Zip Code 8 Clarkson St								
		New York, NY 10014								
	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website							
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tran Food/Beverage Expense Polling Expense Trav 3y - Gitt/Awards/Memorials Expense Printing Expense Trav							aising Expense Juipment & Related Expense rict ategory not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 23/24 Rpt: 78/80		Wilkerson, Denise V. (Mr	5.)				00087899		
4	Date	5	Payee name							
	06/05/2024		Steelman Digital							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$35.00		17316 Shadow Hawk Ln							
			Edmond, OK 73012							
8	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Website Hosting		,		outsi	ide of Texas. Compl	lete Schedule T.	
	EXPENDITORE							, officeholder living e	expense	
						Website Hos	tin			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office souç	ht		Office hel	d	
	Date		Payee name							
	06/26/2024		United States Postal Serv	vice						
	Amount (\$)		Payee address; City;	State:	Zip Co	le				
	\$126.40 1114 S. Bowen Road									
			Arlington, TX 76013-2299	)						
	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	edule)	<b>b)</b> Description				
	OF EXPENDITURE		Advertising Expense					ide of Texas. Compl		
						Postage	, 17,	, officeholder living e	expense	
						1 Ustage				
	Carealata ONII V if direct		tandidata (Office balder, name			h4		Office hel	4	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	L L	Office soug	III		Office hel	lu	
	•									
	Date		Payee name							
	01/17/2024		United States Postal Serv	vice						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le				
	\$306.00		1114 S. Bowen Road							
			Arlington, TX 76013-2299	)						
	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Advertising Expense					ide of Texas. Compl		
							, TX,	, officeholder living e	expense	
						postage				
	Complete ONLY if direct		andidate/Officeholder name	C	Office sou	ht		Office hel	d	
	expenditure to benefit C/OI									

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	nking ense Donations Made By Officeholder/Political		EXPENDITURE Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	pense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reinbursement nead/Rental Expense ense iense iges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1 Total pages S	Schedule F1:	2 FILER NAM	1E				3	Filer ID	(Ethics Commission Filers)
Sch: 24/24			, Denise V. (Mrs.)					00087899	· · · · ·
4 Date	-	5 Payee nam	e				<u> </u>		
06/28/2024		Your Tees							
6 Amount (\$)	\$155.88	<ul> <li>Payee addr</li> <li>305 W. Fo</li> <li>Arlington,</li> </ul>	rk Dr	State;	Zip Coc	e			
8 PURPOS OF EXPENDITI		(a) Category Advertising	See Categories listed at the t g Expense	top of this sche	edule)			ide of Texas. Com , officeholder livinç	
9 Complete <u>ON</u> expenditure t	<u>NLY</u> if direct to benefit C/OF		fficeholder name	0	ffice soug	ht		Office he	eld
Date		Payee nam	e						
06/06/2024		Your Tees							
Amount (\$)		Payee addr	ess; City;	State;	Zip Coc	e			
	\$370.22	305 W. Fo Arlington,							
PURPOS OF EXPENDITI		(a) Category ( Advertising	See Categories listed at the t g Expense	top of this sche	edule)			ide of Texas. Com , officeholder living	
Complete <u>ON</u> expenditure t	<u>NLY</u> if direct to benefit C/OF		fficeholder name	0	ffice soug	ht		Office he	əld

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ages Schedule K: /1 Rpt: 80/80				
2	FILER NAME	(Ethics Commission Filers)				
	Wilkerson, D	899				
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	02/13/2024		Springhill Suites			\$16.59
		6	Address of person from whom amount is received; City; State; Zip Cod	е		
		_	Austin, TX 78744	<b>-</b>		
		ľ	Purpose for which amount is received	_ Check if po	olitical conti	ribution returned to filer
			Refund of over payment on room charges			