FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015622 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Optometric PAC Date Received **ELECTRONICALLY FILED** 07/03/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3011 N. Lamar Ste 300 Change of Address Austin, TX 78705 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Ms. Brenda J. NAME Date Processed NICKNAME **SUFFIX** LAST BJ Date Imaged Avery CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 3011 N. Lamar STREET **ADDRESS** Ste 300 (Residence or Business) Austin, TX 78705 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 707-2020 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2024 06/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			T	
L2 COMMITTEE NAME	6		13 Filer ID	(Ethics Commission Filers)
Texas Optometric PA	<u> </u>		00015622	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported		
	applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
.5 CONTRIBUTION TOTALS		D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR		
TOTALS	CONTRIBUTIONS N	MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	27,795.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	T DAY \$	448,224.00
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
.6 AFFIDAVIT	l		<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	perjury, that the a	accompanying report is d to be reported by me
		Ms Bro	nda J. Avery	
			ampaign Treasu	ırer
		o.g.i.a.a.oo.o	ampaign model	
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	,	this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Ciarreture ()	advaluata visa sa a at	Drinted name of officer education 1	TH- 5 50	and administrative at 10
Signature of officer	auministering oath	Printed name of officer administering oath	ittle of offi	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 66
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commissio	n Filers)
Tex	as Op	tometric PAC	00015622		,
		E SUBTOTALS		1	
l		SCHEDULE		SUBTOTAL A	MOUNT
	VIL 01 .				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	27,795.20
		COLIED HE AS: NON MONETARY (IN KIND) POLITICAL CONTRIBUTIONS			
2.	Ш	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	П	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
		ORGANIZATION		<u> </u>	
_		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR		
5.	Ш	LABOR ORGANIZATION		\$	
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
-					
7.	П	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
		ORGANIZATION		<u> </u>	
		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (
8.	Ш	SCHEDULE D. PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (JRGANIZATION	\$	
9.	Ш	SCHEDULE E: LOANS		\$	
-					
10.	П	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	
11		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		_	
11.	Ш	SCHEDOLE FZ. UNFAID INCORRED OBLIGATIONS		\$	
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	П	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ANS.	6	8,819.75
14.		SCHEDULE I. NON-FOLHICAL EXFERIDITORES FROM FOLHICAL CONTRIBUTION	5113	\$	0,019.75
		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED		
15.	Ш	TO FILER		\$	
				<u> </u>	
i					
l					
l					
l					
l					
ı					

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 1/61 Rpt: 4/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_	5	Helotes, TX 78023		<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Alexander O.D., Lindsey Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringing! goog	Sunnyvale, TX 75182	Employer (See Instruction).c)		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	15)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Ali O.D., Mohsan Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$20.20
	Deire sin al acces	Pearland, TX 77584	Fundame (Contraction			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Allen O.D., Mark Contributor address; City; State; Zip Code Atlanta, TX 75551	C (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	l ns)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Allison O.D., Joseph Contributor address; City; State; Zip Code Bryan, TX 77802	C (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
			•			

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 2/61 Rpt: 5/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (I Altig O.D., William Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$400.00
_	Deireirel	Fort Worth, TX 76137	lo Fantani (Gardantini			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (I Amador O.D., Nancy Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Optometrist			-,		
	Date 06/15/2024	Full name of contributor out-of-state PAC (I Amin O.D., Opal Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78730				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (I Amir O.D., Nancy Contributor address; City; State; Zip Code San Antonio, TX 78240	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (I Anderson O.D., Vanessa Contributor address; City; State; Zip Code Amarillo, TX 79109			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 3/61 Rpt: 6/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	<u> </u>	Fort Worth, TX 76008	10.5 1 10 11 11	<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Arora O.D., Rajan Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Dallas, TX 75227	.			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Arya O.D., Dimple Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Sugar Land, TX 77479				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Aston II O.D., William Contributor address; City; State; Zip Code Ft Worth, TX 76179	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (IDBaker O.D., Catherine Contributor address; City; State; Zip Code Conroe, TX 77301			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/61 Rpt: 7/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Mission, TX 78572				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Barajas O.D., Juan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Mission, TX 78572	·			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Barber O.D., Matt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Ft. Worth, TX 76116-5525				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Barnes O.D., Sophia Contributor address; City; State; Zip Code Houston, TX 77056			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Barraza O.D., Jessica Contributor address; City; State; Zip Code Killeen, TX 76542			Amount of Contribution (\$)	\$30.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			<u>I</u>			

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 5/61 Rpt: 8/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Arlington, TX 76011				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Bate O.D., Joy Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Haslet, TX 76052	Employer (Coo Instruction	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	15)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Bernay O.D., Deborah Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$200.00
		La Porte, TX 77571				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Bhaga O.D., Sheetal Contributor address; City; State; Zip Code Frisco, TX 75036	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Blount O.D., Brian Contributor address; City; State; Zip Code Beaumont, TX 77706	(ID#:)		Amount of Contribution (\$)	\$208.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	is)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS 		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/61 Rpt: 9/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	5 Full name of contributor [Bock O.D., Matthew6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$20.20
		Houston, TX 77063					
8	Principal occu Optometrist	pation / Job title (See Instructions)	g	Employer (See Instructions	S)		
	Date 06/15/2024	Full name of contributor Brantley O.D., Todd Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Plano, TX 75024 pation / Job title (See Instructions)		Employer (See Instructions	<u>''</u>		
	Optometrist	pation / 300 title (3ee instructions)		Employer (See instructions	>)		
	Date 06/15/2024	Full name of contributor Brending O.D., Gabrielle Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Seabrook, TX 77586					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor Brinegar O.D., Vaughn Contributor address; City; Sta Cedar Park, TX 78613)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor Brochetti O.D., Brenda Contributor address; City; Sta Plano, TX 75075	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBI	UTIONS	5		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this form	ı .	1	Total pages Schedule A1: Sch: 7/61 Rpt: 10/66	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PA Broussard O.D., Wendy Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$100.00
0	Dringing agg	Beaumont, TX 77701	ا ما	Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 (Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PA Brown O.D., Corwin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76003					
	Principal occu Optometrist	pation / Job title (See Instructions)	į į	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PA Brownlee O.D., Chris Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$400.00
		Galveston, TX 77550					
	Principal occu Optometrist	pation / Job title (See Instructions)	[Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PA Bui O.D., Thoai Contributor address; City; State; Zip Code Carrollton, TX 75007				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PA Bullard O.D., Heath Contributor address; City; State; Zip Code Cleburne, TX 76033				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	E	Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 8/61 Rpt: 11/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (Burket O.D., Caitlin Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5.20
_		Harlingen, TX 78552		Ļ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	15)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Butler O.D., W Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Round Rock, TX 78681	Employer (See Instruction			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	15)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Campbell O.D., Megan Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$26.00
		Celina, TX 75009				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction:	ns)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Cargo O.D., Jon Contributor address; City; State; Zip Code Irving, TX 75063	(ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Castleberry O.D., Kim Contributor address; City; State; Zip Code Plano, TX 75024	(ID#:)		Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/61 Rpt: 12/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (ID# Catuncan O.D., Jennifer Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_	Deire die alle access	Bedford, TX 76022	D. Frankrick (O. a. brahamiliana			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Celico O.D., Brian Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Dallas, TX 75231				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Cerda O.D., Juan Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$400.00
		McAllen, TX 78501				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Chang O.D., Sarah Contributor address; City; State; Zip Code Houston, TX 77080)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Chen O.D., Alexander Contributor address; City; State; Zip Code Houston, TX 77004			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/61 Rpt: 13/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00
_		Ft Worth, TX 76137				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cheyne O.D., Chris Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Granbury, TX 76049				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cheyne O.D., Chris Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Granbury, TX 76049				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Chu O.D., Victoria Contributor address; City; State; Zip Code Austin, TX 78745)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Cobb O.D., James Contributor address; City; State; Zip Code Amarillo, TX 79107			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/61 Rpt: 14/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (ID# Colston O.D., Ben Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_		Arlington, TX 76013	1	Ĺ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Conley O.D., Alex Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76131	T			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Conroy O.D., Scott Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$100.00
		Pasadena, TX 77505	T = 1 (0 1 1 ii	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Dallas, TX 75252 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Contaldi O.D., Mario Contributor address; City; State; Zip Code N. Richland Hills, TX 76180			Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how to complete	e this form.		s Schedule A1: 1 Rpt: 15/66		
2	FILER NAME Texas Opton	netric PAC		3 Filer ID (Ethics Commission	ı Filers)	
4	Date 06/15/2024	 Full name of contributor	,	7 Amount of	Contribution (\$)	\$200.00	
_	<u> </u>	Amarillo, TX 79109					
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)			
	Date 06/15/2024	Contributor address; City; State; Zip Code	AC (ID#:)	Amount of	Contribution (\$)	\$50.00	
	Principal occu	Alvin, TX 77511 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> s)			
	Optometrist						
	Date 06/15/2024	Full name of contributor out-of-state PA Cowan O.D., Steve Contributor address; City; State; Zip Code	AC (ID#:)	Amount of	Contribution (\$)	\$100.00	
		Amarillo, TX 79109					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PA Cox O.D., Adam Contributor address; City; State; Zip Code Atlanta, TX 75551	AC (ID#:)	Amount of	Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PA Crowell O.D., Courtney Contributor address; City; State; Zip Code Fort Worth, TX 76107	AC (ID#:)	Amount of	Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
			•				

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Sch: 13/61	
2	FILER NAME Texas Optor	netric PAC		3 Filer ID (Et 00015622	thics Commission Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PA Culbertson O.D., Wayne Contributor address; City; State; Zip Code 	,	7 Amount of C	contribution (\$) \$50.00
		Dallas, TX 75225			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Cummings O.D., Kory Contributor address; City; State; Zip Code	C (ID#:)	Amount of C	contribution (\$) \$50.00
		Fort Worth, TX 76107			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Curtis O.D., Barry Contributor address; City; State; Zip Code	C (ID#:)	Amount of C	ontribution (\$) \$200.00
		Frisco, TX 75034			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Dabney O.D., Brandon Contributor address; City; State; Zip Code Amarillo, TX 79102	C (ID#:)	Amount of C	ontribution (\$) \$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Dang O.D., Thuyhong Contributor address; City; State; Zip Code Houston, TX 77007	C (ID#:)	Amount of C	ontribution (\$) \$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
			•		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 14/61 Rpt: 17/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00	
0	Dringing ogg	Pearland, TX 77584	Employer (See Instructions	<u></u>			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# David O.D., Ashley Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$200.00	
		San Angelo, TX 76904	1 - 1 /0 1	Ĺ			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Davis O.D., Mark Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$100.00	
		San Antonio, TX 78259	_				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#Dawn O.D., Rakich Contributor address; City; State; Zip Code San Antonio, TX 78215	<i>t</i> :)		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (IDFDay, Jr O.D., Bob Contributor address; City; State; Zip Code Garland, TX 75041			Amount of Contribution (\$)	\$200.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
			-				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 15/61 Rpt: 18/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00	
_		Dallas, TX 75219		Ĺ			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: DeMaggio O.D., Julie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20	
		Cedar Park, TX 78613					
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ DeShaw O.D., Jonathan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Garland, TX 75042					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Deakins O.D., Jennifer Contributor address; City; State; Zip Code Fort Worth, TX 76135			Amount of Contribution (\$)	\$200.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Delay O.D., Richard Contributor address; City; State; Zip Code Boerne, TX 78015)		Amount of Contribution (\$)	\$200.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
		-					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 16/61 Rpt: 19/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00	
8	Principal occu	Port Neches, TX 77651 pation / Job title (See Instructions)	9 Employer (See Instruction:) 			
0	Optometrist	valion / 300 title (See mistractions)	Employer (See instruction	15)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Dennis O.D., Keith Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instruction:) () () () () () () () () () () () () ()			
	Optometrist	valion / 300 title (See matractions)	Employer (See instructions	13)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Diaz O.D., Yvonne Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00	
		Edinburg, TX 78541					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Dinh O.D., David Contributor address; City; State; Zip Code Dallas, TX 75206	(ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ns)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Dolce O.D., Jackson Contributor address; City; State; Zip Code Port Neches, TX 77651			Amount of Contribution (\$)	\$5.20	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ns)			
			·				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 17/61 Rpt: 20/66		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (Dunnigan O.D., Shawn Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$200.00	
_	Dringing age	Lumberton, TX 77657	O Employer (Coo Instructions	<u></u>			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (Duong O.D., Nghiem Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$75.00	
	D: : 1	Richardson, TX 75080		Ĺ			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (El Hage O.D., Sylvie Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00	
		Houston, TX 77056					
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (Ellis O.D., John Contributor address; City; State; Zip Code El Paso, TX 79902	(ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (Ermis O.D., Keith Contributor address; City; State; Zip Code Wharton, TX 77488	(ID#:)	•	Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/61 Rpt: 21/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Eylar O.D., Crystal 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Allen, TX 75002				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Ezzell O.D., Steven Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00
	Deignainal agai	Abilene, TX 79601	Faculty on (Co.) In attraction of			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Fandry O.D., Ellen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		seabrook, TX 77586				
	Principal occu Optometrist	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Feeser O.D., Michael Contributor address; City; State; Zip Code Huntingtown, MD 20639			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Fleitman O.D., Cynthia Contributor address; City; State; Zip Code Gainesville, TX 76240)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/61 Rpt: 22/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00	
_	Deinsinal assu	Laredo, TX 78041	O Frankrija (Caa krativistia na	_			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Fortenberry O.D., Sandra Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Helotes, TX 78023					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Gamini O.D., Safi Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20	
		Plano, TX 75093					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Garcia Holle O.D., Laura Contributor address; City; State; Zip Code San Angelo, TX 76904			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Garcia O.D., Claudia Contributor address; City; State; Zip Code Houston, TX 77081			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/61 Rpt: 23/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Houston, TX 77064 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>-,</u>		
0	Optometrist	oalion / Job title (See matractions)	3 Employer (See instructions	>)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID) Gee O.D., Kevin Contributor address; City; State; Zip Code	<u>; </u>	•	Amount of Contribution (\$)	\$400.00
	Deinsinal assu	Missouri City, TX 77459	Familia van (Cara Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Gibson O.D., David Contributor address; City; State; Zip Code	t:)	•	Amount of Contribution (\$)	\$50.00
		Lubbock, TX 79423				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID) Gonzalez O.D., Jaime Contributor address; City; State; Zip Code Plano, TX 75093	<u>; </u>		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID: Graham Hayter O.D., Paul Contributor address; City; State; Zip Code Irving, TX 75063	#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			-			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 21/61 Rpt: 24/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Midland, TX 79705		Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID: Gray O.D., Jeannie Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
	Deire sin al acces	Midland, TX 79705	Foundation (On a backwarting			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID: Greeman III O.D., Nelson Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78212				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID) Greeman O.D., Kevin Contributor address; City; State; Zip Code San Antonio, TX 78212	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID: Green O.D., Leigh Contributor address; City; State; Zip Code Woodway, TX 76712	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 22/61 Rpt: 25/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	Delicalization	College Station, TX 77845	In Employer (Contraction	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Greenstein O.D., Karena Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Dallas, TX 75216	1 - 1 (2 1 1 1			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Hall O.D., Jamie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
		Wills Point, TX 75169				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Hammond O.D., Eric Contributor address; City; State; Zip Code Austin, TX 78750			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Hanson O.D., Mark Contributor address; City; State; Zip Code Arlington, TX 76012			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	·)		
			•			

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this form.	I .	pages Schedule A1: 23/61 Rpt: 26/66	
2	FILER NAME Texas Optor	netric PAC		3 Filer II 0001	D (Ethics Commission 5622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7 Amou	nt of Contribution (\$)	\$20.20
_	<u> </u>	Fort Worth, TX 76131				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Hart O.D., Peggy Contributor address; City; State; Zip Code	C (ID#:)	Amou	nt of Contribution (\$)	\$50.00
	Principal occu	Houston, TX 77079 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Optometrist			-)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Hartman O.D., Amy Contributor address; City; State; Zip Code	C (ID#:)	Amou	nt of Contribution (\$)	\$52.00
		Victoria, TX 77904				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Harvey O.D., Cameo Contributor address; City; State; Zip Code Abilene, TX 79605	C (ID#:)	Amou	nt of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	6)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Hawari O.D., Andy Contributor address; City; State; Zip Code Mineola, TX 75773	C (ID#:)	Amou	nt of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			<u>'</u>			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/61 Rpt: 27/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		Amarillo, TX 79109				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Heeg O.D., Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Coppell, TX 75019				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Hejny O.D., Whitney Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Miles, TX 76861				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Helbert-Green O.D., Carolyn Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Henry O.D., Amy Contributor address; City; State; Zip Code Victoria, TX 77904)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
		-				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 25/61 Rpt: 28/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	ı Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (ID Hoang O.D., Bao Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_	Dringing age	Katy, TX 77494	0 Employer (Coo Instruction	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Hoang O.D., Kathy Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Katy, TX 77494	Familia var (Cala Jackii vationa	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Hopping O.D., Desiree Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Friendswood, TX 77546				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Hopping O.D., Ron Contributor address; City; State; Zip Code Friendswood, TX 77546	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Hutchins O.D., Jaclyn Contributor address; City; State; Zip Code San Antonio, TX 78257	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to con	mplete this forr	n.	1	Total pages Schedule A1: Sch: 26/61 Rpt: 29/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-o Huynh O.D., Hieu Contributor address; City; State; Zip C)	7	Amount of Contribution (\$)	\$50.00
_	5	Dallas, TX 75240					
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-o Johle O.D., Sarah Contributor address; City; State; Zip C	f-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Hutto, TX 78634					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-ognous out-ogno	f-state PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		Dallas, TX 75287					
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/15/2024	Jolivette O.D., Nia	f-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	f-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
			·				

	MONET	ARY POLITICAL CONTRIBI	UTIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 27/61 Rpt: 30/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PA Jordan O.D., Emily Contributor address; City; State; Zip Code 	AC (ID#:)	7	Amount of Contribution (\$)	\$50.00
8	Dringinal occu	Austin, TX 78746 pation / Job title (See Instructions)	9 Employer (See Instructions)c)		
0	Optometrist	oation / Job title (See instructions)	employer (See instructions	15)		
	Date 06/15/2024	Full name of contributor out-of-state PA Karanges O.D., Gayle Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$100.00
		Arlington, TX 76005		Ţ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 06/15/2024	Full name of contributor out-of-state PA Kemp O.D., Robert Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77015-2310				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 06/15/2024	Full name of contributor out-of-state PA Kimball O.D., Leigh Contributor address; City; State; Zip Code Beaumont, TX 77706	AC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 06/15/2024	Full name of contributor out-of-state PA Knight O.D., Millicent Contributor address; City; State; Zip Code Plano, TX 75093	AC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	is)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 28/61 Rpt: 31/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor	_	7	Amount of Contribution (\$)	\$104.00
_		Harker Heights, TX 76548	1			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Kodukula O.D., Dipa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)	Employer (See Instructions	.)		
	Optometrist	oddon 7 oob dde (oee moddedono)	Employer (See monded)	')		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Kuder O.D., Bryan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
		Carrollton, TX 75007				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Kuykendall O.D., Traci Contributor address; City; State; Zip Code Cleburne, TX 76033			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Lagunas O.D., Claudio Contributor address; City; State; Zip Code The Woodlands, TX 77382			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 29/61 Rpt: 32/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
0	Dringing agg	Houston, TX 77075	Employer (See Instructions	<u>,,</u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	o)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Lambert O.D., Sawyer Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$100.00
	Dringing aggr	Houston, TX 77008	Employer (See Instructions	<u>''</u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	o)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Larry O.D., Gunnell Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$100.00
		Witchita Falls, TX 76308				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Le O.D., Anne Contributor address; City; State; Zip Code Houston, TX 77072	:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Le O.D., Hoan Contributor address; City; State; Zip Code Spring, TX 76135		•	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 30/61 Rpt: 33/66	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state Le O.D., Lisa Contributor address; City; State; Zip Cod)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Missouri City, TX 77459 pation / Job title (See Instructions)	l _o	Employer (See Instructions	·/ 		
0	Optometrist	Jation / Job title (See Instituctions)	J	Employer (See Instructions)		
	Date 06/15/2024	Lemanski O.D., Sundra Contributor address; City; State; Zip Cod)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78727 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Optometrist						
	Date 06/15/2024	Linh O.D., Linh	ate PAC (ID#: e			Amount of Contribution (\$)	\$50.00
		Leander, TX 78641					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Lou O.D., Oliver				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/15/2024	Ly O.D., Alexandra				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 31/61 Rpt: 34/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (II Mai O.D., Kelly Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_		Cypress, TX 77433				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Maldonado O.D., Michael Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		El Paso, TX 79902		Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Maldonado O.D., Nicole Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78249				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Martin O.D., Joe Contributor address; City; State; Zip Code Cleburne, TX 76033	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Martin O.D., Michal Contributor address; City; State; Zip Code Austin, TX 78735	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 32/61 Rpt: 35/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (ID#: Martinez O.D., Michelle Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_		Ft. Worth, TX 76244	1			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Masters O.D., Trishna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Deinsinal assu	Arlington, TX 76006	Frankrije (Coo kodernostiono	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: McCarty O.D., Dennis Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Cedar Park, TX 78613				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: McClain O.D., Christos Contributor address; City; State; Zip Code College Station, TX 77845)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: McCormick O.D., Michael Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/61 Rpt: 36/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ McCown O.D., Joshua 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Dringing Lago	Gatesville, TX 76528	O Familia var (Coo la atrustia an			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00
		AUSTIN, TX 78748-1051				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_McPherson O.D., Kimberly Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		North Richland Hills, TX 76180				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Means O.D., Stephen Contributor address; City; State; Zip Code Huntsville, TX 77340)		Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Montgomery O.D., Brandi Contributor address; City; State; Zip Code Missouri City, TX 77459)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIB	SCHEDULE A	A1	
	The Instruc	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 34/61 Rpt: 37/66	
2	FILER NAME Texas Opton	netric PAC		3 Filer ID (Ethics Commission Fil 00015622	lers)
4	Date 06/15/2024	 Full name of contributor out-of-state PA Moon O.D., Debra Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$)	100.00
_		Plano, TX 75024			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PAMoore O.D., Tory Contributor address; City; State; Zip Code	PAC (ID#:)	Amount of Contribution (\$)	\$50.00
	<u> </u>	Dumas, TX 79029			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PAMora O.D., David Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$)	\$50.00
		Laredo, TX 78043			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Morozco O.D., Michael Contributor address; City; State; Zip Code San Antonio, TX 78240	AC (ID#:)	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 06/15/2024	Full name of contributor out-of-state PA Mosbacher O.D., Diane Contributor address; City; State; Zip Code Dallas, TX 75248	AC (ID#:)	Amount of Contribution (\$)	100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 35/61 Rpt: 38/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$20.20
_	5	Austin, TX 78750				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Murrell O.D., Jessica Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
	Delicalization	Spring, TX 77002				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Nailing O.D., Amy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
		Amarillo, TX 79107				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Newman O.D., Clarke Contributor address; City; State; Zip Code Dallas, TX 75201			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Newton O.D., Ronald Contributor address; City; State; Zip Code Laredo, TX 78040			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTR	IBUTION	NS .		SCHEDUL	E A1
	The Instru	ction Guide explains how to compl	lete this for	m.	1	Total pages Schedule A1: Sch: 36/61 Rpt: 39/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	Nguyen O.D., Hai	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
_		Portland, TX 78374	1-		_		
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/15/2024	Nguyen O.D., Jenifer)		Amount of Contribution (\$)	\$50.00
		Addison, TX 75001					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-sta Nguyen O.D., Kimuyen Contributor address; City; State; Zip Code	ate PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Richardson, TX 75082					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Nguyen O.D., Long				Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 06/15/2024	Nguyen O.D., Quan)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 37/61 Rpt: 40/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00	
_	Deireirel	Dallas, TX 75224	D. Faralassa (Octobration				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Nguyen O.D., Thai-An Contributor address; City; State; Zip Code	#:	•	Amount of Contribution (\$)	\$100.00	
	Deinsinal	Dallas, TX 75206	Fundament (On a london ation	<u> </u>			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (IDNguyen O.D., Tu Contributor address; City; State; Zip Code	#:)	•	Amount of Contribution (\$)	\$50.00	
		Cypress, TX 77429					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Nguyen O.D., Vicki Contributor address; City; State; Zip Code Grand Prairie, TX 75054	#:)		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Nichols O.D., Brian Contributor address; City; State; Zip Code Mt Pleasant, TX 75455			Amount of Contribution (\$)	\$200.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 38/61 Rpt: 41/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$104.00
_	Discipal	Georgetown, TX 78628				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ O'Brien O.D., Lisa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Amarillo, TX 79109				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Ousley O.D., Bruce Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Highland Village, TX 75077				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Park O.D., Jon Contributor address; City; State; Zip Code Irving, TX 75063			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Pass O.D., Hulon Contributor address; City; State; Zip Code Fort Stockton, TX 79735)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how to complete t	this form.	1	ages Schedule A1: 9/61 Rpt: 42/66		
2	FILER NAME Texas Opton	netric PAC		3 Filer ID 00015	(Ethics Commissio	n Filers)	
4	Date 06/15/2024	 Full name of contributor out-of-state PAC Pass O.D., Joshua Contributor address; City; State; Zip Code 		7 Amoun	t of Contribution (\$)	\$100.00	
_	Deignaignal	Fort Stockton, TX 79735	O Francisco (Coo Instructions				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)			
	Date 06/15/2024	Contributor address; City; State; Zip Code	C (ID#:)	Amoun	t of Contribution (\$)	\$100.00	
	Principal occu	Frisco, TX 75035 pation / Job title (See Instructions)	Employer (See Instructions	ls)			
	Optometrist	,		,			
	Date 06/15/2024	Full name of contributor out-of-state PAC Patel O.D., Neha Contributor address; City; State; Zip Code	C (ID#:)	Amoun	t of Contribution (\$)	\$50.00	
		Fort Worth, TX 76137		<u> </u>			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	is)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Patel O.D., Nimisha Contributor address; City; State; Zip Code Houston, TX 77027	C (ID#:)	Amoun	t of Contribution (\$)	\$20.20	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Patel O.D., Riyal Contributor address; City; State; Zip Code Austin, TX 78704	C (ID#:)	Amoun	t of Contribution (\$)	\$100.00	
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 40/61 Rpt: 43/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00	
_	Deinsinal assu	Beaumont, TX 77706	2. Evanlavar (Can Instructions				
8	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Patrick O.D., Carey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
		Allen, TX 75002	5 1 (0 1 : "				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Pepin O.D., Allison Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$52.00	
		Georgetown, TX 78628					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Peterson O.D., Christopher Contributor address; City; State; Zip Code Carrolton, TX 75006			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Peterson O.D., Savannah Contributor address; City; State; Zip Code Webster, TX 77598)		Amount of Contribution (\$)	\$26.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 41/61 Rpt: 44/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_		Coppell, TX 75019	1	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Phillips O.D., Jeff Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		Texarkana, TX 75503				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Pierce O.D., Jordan Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76177				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Pillai O.D., Anith Contributor address; City; State; Zip Code Sugarland, TX 77479	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID Pollard O.D., Paige Contributor address; City; State; Zip Code Midlothian, TX 76065	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 42/61 Rpt: 45/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 06/15/2024	 Full name of contributor out-of-state PAC Poole O.D., Brianne Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00	
_		Spicewood, TX 78669		Ţ			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Poole O.D., Mohan Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00	
	Deinsinal assu	Marble Falls, TX 78654	Franks on (Cook lastin stiernstie				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	IS)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Prapta O.D., Shawn Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00	
		Mansfield, TX 76063					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Prati O.D., Martin Contributor address; City; State; Zip Code Houston, TX 77058	C (ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Proske O.D., Paul Contributor address; City; State; Zip Code Spring, TX 77379	C (ID#:)		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)			
			I				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/61 Rpt: 46/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Spring, TX 77379				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Pulpan O.D., Stephanie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Perryton, TX 79070	Employer (Cool looks vetices	_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Quinlivan O.D., Paige Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78628				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Raley O.D., Audrey Contributor address; City; State; Zip Code New Braunfels, TX 78132			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Ramirez O.D., Angie Contributor address; City; State; Zip Code Pharr, TX 78582			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 44/61 Rpt: 47/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	5	McAllen, TX 78504				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Ramirez-Shank O.D., Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	San Antonio, TX 78232 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	odition / Job title (See Instructions)	Employer (See instructions	,		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Ratcliff O.D., Reagan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Friendswood, TX 77546				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Reneau O.D., Aaron Contributor address; City; State; Zip Code Kingwood, TX 77345			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Reynolds O.D., Samantha Contributor address; City; State; Zip Code Haslet, TX 76052			Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/61 Rpt: 48/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (ID#:_ Robertson O.D., Reid Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
_	Discipal	Allen, TX 75013				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robertson O.D., Reid Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Allen, TX 75013 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson O.D., Beth Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Friendswood, TX 77546				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson O.D., Nathaniel Contributor address; City; State; Zip Code Lufkin, TX 75904)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez O.D., Jaime Contributor address; City; State; Zip Code Weslaco, TX 78596)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 46/61 Rpt: 49/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAC (Rojas O.D., Luis Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_	Dringing agg	Dallas, TX 75204	0 Employer (Co.) Instruction	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Rosemore O.D., Corey Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$20.20
	Deinsinal	Frisco, TX 75035	Faralassa (Ossa Instruction	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Rosemore O.D., Ryan Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Frisco, TX 75033				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Salchak O.D., Robert Contributor address; City; State; Zip Code Sugarland, TX 77479	ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (Sandberg O.D., Kyle Contributor address; City; State; Zip Code San Antonio, TX 78229	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/61 Rpt: 50/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Sappington O.D., Amanda 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
_	Dringing Lago	Amarillo, TX 79119	O Familia var (Coo la atrustia an			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Sawhney O.D., Dimple Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	pation 7 oob title (oce monuculons)	Employer (See Matractions	,		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Segu O.D., Pat Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Missouri City, TX 77459				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Shandley O.D., Brian Contributor address; City; State; Zip Code Lake Jackson, TX 77566			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Shannon O.D., Bridget Contributor address; City; State; Zip Code Frisco, TX 75035			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONT	RIBUTIONS			SCHEDULI	E A1
	The Instru	ction Guide explains how to com	plete this form.	:		Total pages Schedule A1: Sch: 48/61 Rpt: 51/66	
2	FILER NAME Texas Optor	netric PAC		;		Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	Shauger O.D., Susan	state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
_		Austin, TX 78727	1				
8	Optometrist	pation / Job title (See Instructions)	9 Em	ployer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of- Shidlofsky O.D., Charles Contributor address; City; State; Zip C	state PAC (ID#: ode)		Amount of Contribution (\$)	\$50.00
	Drincinal occu	Plano, TX 75024 pation / Job title (See Instructions)	Em	ployer (See Instructions)			
	Optometrist	oditott/ 300 title (See Histractions)		ployer (See mstructions)			
	Date 06/15/2024	Full name of contributor out-of- Sianghio O.D., Leyden Contributor address; City; State; Zip C	state PAC (ID#:			Amount of Contribution (\$)	\$20.20
		San Antonio, TX 78255					
	Principal occu Optometrist	pation / Job title (See Instructions)	Em	ployer (See Instructions)			
	Date 06/15/2024	Sitterle O.D., Scott	state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Em	ployer (See Instructions)			
	Date 06/15/2024	Full name of contributor out-of- Slaughter O.D., Kim Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Em	ployer (See Instructions)			
			l				

	MONET	ARY POLITICAL CONTRIBU	JTIONS	SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	this form.	1 Total pages Schedule A1: Sch: 49/61 Rpt: 52/66	
2	FILER NAME Texas Optor	netric PAC		3 Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7 Amount of Contribution (\$)	\$100.00
_		Mansfield, TX 76063			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ons)	
	Date 06/15/2024	Full name of contributor out-of-state PAC Sorrenson O.D., Laurie Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$)	\$500.00
		Cedar Park, TX 78613			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ons)	
	Date 06/15/2024	Full name of contributor out-of-state PAC Sosa O.D., Virginia Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$)	\$100.00
		Uvalde, TX 78801			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ons)	
	Date 06/15/2024	Full name of contributor out-of-state PAC Stephens O.D., Nancy Contributor address; City; State; Zip Code Pearland, TX 77581	C (ID#:)	Amount of Contribution (\$)	\$20.20
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions	ons)	
	Date 06/15/2024	Full name of contributor out-of-state PAC Steven O.D., Kurtin Contributor address; City; State; Zip Code Dallas, TX 75252	C (ID#:)	Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ons)	
			1		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/61 Rpt: 53/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$20.20
_		Big Spring, TX 79720				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Strong O.D., Jane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Cypress, TX 77419				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Studebaker O.D., Emily Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.20
		Georgetown, TX 78626				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Sturm O.D., Mark Contributor address; City; State; Zip Code Austin, TX 78749			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Sullivan O.D., Mitchell Contributor address; City; State; Zip Code Carrollton, TX 75006			Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 51/61 Rpt: 54/66	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5.00
_		Dallas, TX 75243				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Taylor O.D., Erin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Amarillo, TX 79110 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Terrell O.D., Jenny Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Hurst, TX 76054				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Thames O.D., Lacey Contributor address; City; State; Zip Code Hutto, TX 78634			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Thomas O.D., Jack Contributor address; City; State; Zip Code Amarillo, TX 79109)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	ITION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 52/61 Rpt: 55/66	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$50.00
_	Daine in a la casa	Melissa, TX 75454	- 10		<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Thompson O.D., Melanie Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Amarillo, TX 79109 pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Optometrist	salori, cop alle (coe mollacione)		Employer (Gee mendeners	',		
	Date 06/15/2024	Full name of contributor out-of-state PAC Thornton O.D., Kristofer Contributor address; City; State; Zip Code	C (ID#:			Amount of Contribution (\$)	\$100.00
		Longview, TX 75605					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Tilson O.D., Alan Contributor address; City; State; Zip Code Irving, TX 75038				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC Tovias O.D., Mayra Contributor address; City; State; Zip Code Santa Fe, TX 77510	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
			ı				

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 53/61 Rpt: 56/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor out-of-state PAr Tran O.D., Anthony Contributor address; City; State; Zip Code 	C (ID#:)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75206		Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Tran O.D., Jessica Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$20.20
	Drincinal occu	Austin, TX 78759 pation / Job title (See Instructions)	Employer (See Instructions	=) 		
	Optometrist	Janon / Job title (See Instructions)	Employer (See instructions	>)		
	Date 06/15/2024	Full name of contributor out-of-state PAGE Tran O.D., Joshua Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$5.20
		Richmond, TX 77407				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAI Tran O.D., Lori Contributor address; City; State; Zip Code Plano, TX 75024	C (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 06/15/2024	Full name of contributor out-of-state PAI Tran O.D., Toan Contributor address; City; State; Zip Code Carrollton, TX 75010	C (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONT	RIBUTIONS	5		SCHEDUL	E A1
	The Instru	ction Guide explains how to cor	mplete this form		1	Total pages Schedule A1: Sch: 54/61 Rpt: 57/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	Trichel O.D., Jessica	f-state PAC (ID#:		7	Amount of Contribution (\$)	\$20.20
		Texarkana, TX 75503	,				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 E	Employer (See Instructions))		
	Date 06/15/2024	Full name of contributor out-o Trinh O.D., Kim Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78728 pation / Job title (See Instructions)	T F	Employer (See Instructions)			
	Optometrist	sation, sob title (see instructions)		imployer (dee mandenons,	,		
	Date 06/15/2024	Full name of contributor out-o Tupa O.D., Faye Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Ganado, TX 77962					
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 06/15/2024	Turner O.D., Kimberly				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 06/15/2024	Twa O.D., Michael	f-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	E	Employer (See Instructions))		
			'				

	MONET	ARY POLITICAL CONTR	RIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 55/61 Rpt: 58/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$400.00
_		Austin, TX 78749	1-				
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 06/15/2024	Tybor O.D., John				Amount of Contribution (\$)	\$20.20
	Deinsinal	Austin, TX 78746		Faralas and Constructions	Ĺ		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-sta Upchurch O.D., Alan Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$50.00
		McKinney, TX 75070					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Urizar O.D., Jocelyn				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/15/2024	Vasquez O.D., Celina				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 56/61 Rpt: 59/66	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Corpus Christi, TX 78414	Employer (See Instruction	<u>e)</u>		
0	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Vorster O.D., Edward Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$400.00
		Silsbee, TX 77656	1	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Wagner O.D., Troy Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
		The Woodlands, TX 77382				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Wallace O.D., August Contributor address; City; State; Zip Code Longview, TX 75603	D#:)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (II Walters O.D., Mary Kate Contributor address; City; State; Zip Code Fort Worth, TX 76008	D#:)		Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTR	RIBUTIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comp	elete this form.	1	Total pages Schedule A1: Sch: 57/61 Rpt: 60/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 06/15/2024	Wampler O.D., Kim	ate PAC (ID#:		Amount of Contribution (\$)	\$104.00
_		Cedar Park, TX 78613	1			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Emple	oyer (See Instructions)		
	Date 06/15/2024	Warstler O.D., Ashley Contributor address; City; State; Zip Co	ate PAC (ID#:		Amount of Contribution (\$)	\$50.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Emplo	oyer (See Instructions)		
	Optometrist	,	·	,		
	Date 06/15/2024	Full name of contributor out-of-si Way O.D., David Contributor address; City; State; Zip Co	ate PAC (ID#:)	Amount of Contribution (\$)	\$200.00
		Spring, TX 77379				
	Principal occu Optometrist	oation / Job title (See Instructions)	Emple	oyer (See Instructions)		
	Date 06/15/2024	Wedel O.D., Karl	ate PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Emplo	oyer (See Instructions)		
	Date 06/15/2024	West O.D., Jacob	ate PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Emplo	oyer (See Instructions)		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/61 Rpt: 61/66	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission Filers) 00015622	
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_		San Antonio, TX 78223				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Principal occu	San Antonio, TX 78209 pation / Job title (See Instructions)	Employer (See Instructions)		
	Optometrist					
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wild O.D., Tristan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Austin, TX 78730				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wilken O.D., Bret Contributor address; City; State; Zip Code Coppell, TX 75019			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:_Williams O.D., Bryan Contributor address; City; State; Zip Code Dallas, TX 75226			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	plete this for	n.	1	Total pages Schedule A1: Sch: 59/61 Rpt: 62/66	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission Filers 00015622	
4	Date 06/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_		Joplin, MO 64804					
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/15/2024	Full name of contributor out-of-s Wilson O.D., Kent Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu	Terrell, TX 75160 pation / Job title (See Instructions)		Employer (See Instructions			
	Optometrist	oalion / Job tille (See instructions)		Employer (See instructions	,		
	Date 06/15/2024	Full name of contributor out-of-s Wineinger O.D., Jeffrey Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Cedar Park, TX 78613					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/15/2024	Wong O.D., Joyce)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/15/2024	Wright O.D., David				Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
			'				

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 60/61 Rpt: 63/66		
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission Filers) 00015622		
4	Date 06/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00	
_		Seminole, TX 79360	T				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Yates O.D., Ashleigh Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$10.40	
	Principal occu	San Antonio, TX 78247 pation / Job title (See Instructions)	Employer (See Instructions	e)			
	Optometrist	Janoi 17 Job line (See Instructions)	Employer (See instructions	3)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Yee O.D., Jamie Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00	
		Dallas, TX 75033					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAC Yeh O.D., Shihwei Contributor address; City; State; Zip Code Frisco, TX 75035	C (ID#:)		Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 06/15/2024	Full name of contributor out-of-state PAG Yousef O.D., Deliah Contributor address; City; State; Zip Code Austin, TX 78746	C (ID#:)		Amount of Contribution (\$)	\$104.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)			
			•				

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1		
	The Instruction Guide explains how to complete this form.		l pages Schedule A1: : 61/61 Rpt: 64/66		
2	FILER NAME Texas Optometric PAC		Filer ID (Ethics Commission Filer 00015622		
4	Date 06/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Zhang O.D., Joyce 6 Contributor address; City; State; Zip Code	7 Amo	ount of Contribution (\$)	\$20.20	
	San Antonio, TX 78209				
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instruction Optometrist	ons)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/15/2024 Zike O.D., Abigail		ount of Contribution (\$)	\$52.00	
	Contributor address; City; State; Zip Code College Station, TX 77845				
	Principal occupation / Job title (See Instructions) Employer (See Instruction Optometrist	ons)			

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622
Date 06/24/2024	5 Payee name Authorize.net	
Amount (\$) 84.99 Expenditure from corporate funds	7 Payee Address; City; State; Zip 808 E Utah Valley Dr American Fork, UT 84003	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date 06/05/2024	Payee name Carriage House Partners	
Amount (\$) 6,250.00 Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Hidden Trails Arlington, TX 76017	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Lobbyist
Date	Payee name	
06/17/2024 Amount (\$) 646.13 Expenditure from corporate funds	Clem, Mike Payee Address; City; State; Zip 10155 Shadyview Dallas, TX 75238	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date 06/25/2024	Payee name Paypal	
Amount (\$) 450.39 Expenditure from corporate funds	Payee Address; City; State; Zip 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Payment fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622
5 Payee name QuickBooks Payments	
7 Payee Address; City; State; Zip 2632 Marine Way Mountain View, CA 94043	
	Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Payee name	
TOA Facility	
Payee Address; City; State; Zip	
3011 N Lamar ste 300	
Austin, TX 78701	
(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	Description (See instructions regarding type of information required.) Facility Fee
	Texas Optometric PAC 5 Payee name QuickBooks Payments 7 Payee Address; City; State; Zip 2632 Marine Way Mountain View, CA 94043 (a) Category (See instructions for examples of acceptable categories) Accounting/Banking Payee name TOA Facility Payee Address; City; State; Zip 3011 N Lamar ste 300 Austin, TX 78701 (a) Category (See instructions for examples of acceptable categories) (b)