### COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM CEC COVER SHEET PG 1

Th	e CEC Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00054753	2 Total pages filed: 260
3	COMMITTEE NAME			OFFICE USE ONLY
	Collin County Dem	nocratic Party		Date Received ELECTRONICALLY FILED 07/11/2024
4		ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE	
	ADDRESS	6829 K Avenue, Suite #111		Date Hand-delivered or Date Postmarked
	Change of Address			
		Plano, TX 75074		Receipt # Amount
				Date Processed
				Date Imaged
				Date imaged
5	CAMPAIGN	MS/MRS/MR FIRST		MI
	TREASURER NAME	Gregory		
		NICKNAME LAST		SUFFIX
		Watling		
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE
	TREASURER STREET	2932 Regal Rd		
	ADDRESS	C/O Jared Flores		
	(Residence or Business)	Plano, TX 75075		
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE
	TREASURER MAILING	606 Fannin Court		
	ADDRESS			
	Change of Address	Allen, TX 75013-8531		
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
	TREASURER	(469) 352-5034		
	PHONE			
9	REPORT	January 15 30	oth day before election	Final Report
	TYPE		h day before election	10th day after campaign treasurer
		X         July 15		termination
			unoff	
10	PERIOD	Month Day Year	Month Day	Year
	COVERED	01/01/2024 TH	ROUGH 06/30/202	24
11	ELECTION			
		Month Day Year	Primary Runoff	Other
			General Special	
		GO 1	TO PAGE 2	
Fo	rms provided by Te	xas Ethics Commission www.et	hics.state.tx.us	Version V4.1.0.d378aba0

#### COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer I	ID (Ethics Commission Filers)
Collin County Democrat	ic Party		00054	4753
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	9	\$ 25.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	:	\$ 100,198.08
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	:	\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	:	\$ 64,690.45
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST	DAY	\$ 54,856.00
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 E REPORTING PERIOD	THE 9	\$ 0.00
16 AFFIDAVIT	•			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		0		_
		Gregory Signature of Ca	y Watling	-
		Signature of Ca	paigir i	
AFFIX NOTARY	STAMP / SEAL ABOV	E		
		, tł	nis the	day
of	_, 20, to certil	y which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title o	of officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

SUBTOTALS - CEC	CC	FORM CEC OVER SHEET PG 3 3 of 260
17 COMMITTEE NAME Collin County Democratic Party	18 Filer ID 00054753	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 99,228.08
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 970.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	<b>\$</b> 64,690.45
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
10. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	<b>\$</b> 270.88

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/188 Rpt: 4/260	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Collin Count	ty Democratic Party			00054753	
4 Date 02/17/2024	5 Full name of contributor out-of-state PAC (ID#: ADAMS-MOE, MARY		7	Amount of Contribution (\$)	\$62.15
	6 Contributor address; City; State; Zip Code		1		
	Lucas, TX 75002				
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	3)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
01/17/2024	ADAMS-MOE, MARY				\$62.15
	Contributor address; City; State; Zip Code				
Dringing occu		Employer (See Instructions			
Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/17/2024	ADAMS-MOE, MARY				\$62.15
Principal occu Retired	Lucas, TX 75002 upation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
		<u> </u>	<del></del>		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷00.45
04/17/2024	ADAMS-MOE, MARY				\$62.15
	Contributor address; City; State; Zip Code Lucas, TX 75002				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
Retired	· · · · · · · · · · · · · · · · · · ·	Retired	-		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/17/2024	ADAMS-MOE, MARY				\$62.15
	Contributor address; City; State; Zip Code Lucas, TX 75002				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired		Retired			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/188 Rpt: 5/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	03/17/2024	ADAMS-MOE, MARY				\$62.15
		6 Contributor address; City; State; Zip Code		"		
_	Dringinal agai	Lucas, TX 75002	- Employer (See Instruction)			
ð	Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	s)		
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
	03/08/2024	Ackerman, Baer				\$43.10
		Contributor address; City; State; Zip Code		"		
		Plano, TX 75093		Ĺ		
	Principal occu PHYSICIAN	ipation / Job title (See Instructions)	Employer (See Instructions SELF	s)		
╘				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#	‡:)		Amount of Contribution (\$)	÷100.00
	01/16/2024	Adair, Thomas				\$199.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney	•	Self			
	Date	Full name of contributor out-of-state PAC (ID#		Τ	Amount of Contribution (\$)	
	01/27/2024	Adair, Thomas				\$30.00
		Contributor address; City; State; Zip Code		·		
L		Plano, TX 75074	- <b>i</b>			
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
L	Attorney		Self	_		
	Date	Full name of contributor out-of-state PAC (ID#	<i>‡</i> :)		Amount of Contribution (\$)	····
	01/21/2024	Adams, Harold				\$411.14
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75072				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>ر</u> د)		
	Attorney		Glenn Adams PC	5,		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/188 Rpt: 6/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/23/2024	Agers, Linda				\$10.53
		6 Contributor address; City; State; Zip Code		1		
Ļ		Plano, TX 75023	I			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	RETIRED		Not Employed			
	Date		)		Amount of Contribution (\$)	
	03/23/2024	Agers, Linda		]		\$10.53
		Contributor address; City; State; Zip Code		]		
		Diana TV 75022				
	Dringing oogu	Plano, TX 75023	Employer (Coo Instruction	<u> </u>		
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			Not Employed	-		
	Date		)		Amount of Contribution (\$)	
	02/23/2024	Agers, Linda				\$10.53
		Contributor address; City; State; Zip Code				
		Plano, TX 75023				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	د) ا		
	RETIRED		Not Employed	5)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	Dale 05/23/2024	Agers, Linda	)			\$10.53
	0512512024	-		-		Φ10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75023				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	RETIRED	•	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	04/23/2024	Agers, Linda	/		,	\$10.53
		Contributor address: City; State; Zip Code				
		Plano, TX 75023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED		Not Employed			
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	The Instru	ction Guide explains hov	<i>w</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/188 Rpt: 7/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
2		y Democratic Party			ľ	00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	01/23/2024	Agers, Linda					\$10.53
		6 Contributor address; City; S	State; Zip Code		1		
		Plano, TX 75023					
8	Principal occu RETIRED	pation / Job title (See Instruction:	s)	9 Employer (See Instructions Not Employed	3)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	01/23/2024	Ahmed, Saadia					\$199.00
		Contributor address; City; S			1		
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instruction	ıS)	Employer (See Instructions	5)		
	Consultant		I	Talem			
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/20/2024	Almas, Roslynn		,		, and an element of the second s	\$411.14
	•		State <sup>.</sup> Zin Code				<b>T</b> '
		Plano, TX 75025					
		pation / Job title (See Instruction	S)	Employer (See Instructions	3)		
	Unemployed	l		Unemployed			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	01/27/2024	Anderson, Sherman Bruc					\$155.08
		Contributor address; City; S	State; Zip Code		1		
		Allen, TX 75013					
	•	pation / Job title (See Instruction	S)	Employer (See Instructions	3)		
	Self Employe	ed		Self Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/05/2024	Andre, Joel	_				\$205.67
		Contributor address; City; S	State; Zip Code		1		
			-				
		Plano, TX 75075					
	Principal occu	pation / Job title (See Instruction	iS)	Employer (See Instructions	s)		
	Electrical En	igineer	I	retired			
				1			

	The Instru	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 5/188 Rpt: 8/260	
2	FILER NAME			3 1	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	02/25/2024	Anil Kumar, Y				\$10.00
	1	6 Contributor address; City; State; Zip Code		"		
	ļ					
		Frisco, TX 75035				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	ns)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#	+ #:)		Amount of Contribution (\$)	
	03/25/2024	Anil Kumar, Y				\$10.00
		Contributor address; City; State; Zip Code				
		Frisco, TX 75035				
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instruction	IS)		
	Retired		Retired			
⊢	Date	Full name of contributor out-of-state PAC (ID#	<u>и</u> . )		Amount of Contribution (\$)	
	05/25/2024	Anil Kumar, Y	#:)	'		\$10.00
	05/25/2024					Φ10.00
		Contributor address; City; State; Zip Code				
	ļ	Frisco, TX 75035				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	Retired		Retired	15)		
╞				1		
	Date		#:)	'	Amount of Contribution (\$)	<b>*</b> 10.00
	04/25/2024	Anil Kumar, Y				\$10.00
		Contributor address; City; State; Zip Code				
	ļ	Fiero TV 75025				
L	Di sinal essu	Frisco, TX 75035		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	is)		
	Retired		Retired			
	Date	Full name of contributor Out-of-state PAC (ID#	<i>t</i> :)	/	Amount of Contribution (\$)	
	06/25/2024	Anil Kumar, Y				\$10.00
	ļ	Contributor address; City; State; Zip Code		"		
	ļ					
	ļ					
		Frisco, TX 75035				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Retired		Retired			
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The Instru	ction Guide explains how to complete t	this form.	1 Total pages Schedule A1: Sch: 6/188 Rpt: 9/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
01/25/2024	Anil Kumar, Y		\$10.00
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
	ipation / Job title (See Instructions)	9 Employer (See Instruction	ns)
Retired		Retired	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
06/16/2024	Applebaum, Wayne		\$10.53
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
	ipation / Job title (See Instructions)	Employer (See Instruction	ns)
Writer		Self	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
05/16/2024	Applebaum, Wayne		\$10.53
	Contributor address; City; State; Zip Code		
	Plano, TX 75093	i	
	ipation / Job title (See Instructions)	Employer (See Instruction	ns)
Writer		Self	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
03/16/2024	Applebaum, Wayne		\$10.53
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
	ipation / Job title (See Instructions)	Employer (See Instruction	15)
Writer		Self	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
04/16/2024	Applebaum, Wayne		\$10.53
	Contributor address; City; State; Zip Code		
	Plano, TX 75093	<b>_</b>	
	ipation / Job title (See Instructions)	Employer (See Instruction	15)
Writer		Self	

	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 7/188 Rpt: 10/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/16/2024	Applebaum, Wayne				\$10.53
		6 Contributor address; City; State; Zip Code		"		
		Plano, TX 75093	i			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Writer		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/16/2024	Applebaum, Wayne				\$10.53
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
		pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Writer		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/22/2024	Arnold, Wilma				\$31.18
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75075				
		pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/22/2024	Arnold, Wilma				\$31.18
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
		pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/04/2024	Bado, Angela				\$411.14
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75072				
		pation / Job title (See Instructions)	Employer (See Instructions	is)		
	retired		Retired			
1						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/188 Rpt: 11/260	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	y Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
01/19/2024	Bailey, Kim		\$4	411.14
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75229			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Attorney		Liberty Mutual Group		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/17/2024	Barnett, Barbara		9	\$30.00
	Contributor address; City; State; Zip Code			
	Wylie, TX 75098			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/23/2024	Bauer, Kristina			\$40.00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75082			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Executive		Texas Lyme Alliance		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/20/2024	Beene, Mike			\$25.00
	Contributor address; City; State; Zip Code			
	Mckinney, TX 75071			
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	i)	
retired		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/20/2024	Beene, Mike	)	.,	\$25.00
0_,_0,_0_	Contributor address; City; State; Zip Code			
	Contributor address, City, State, Zip Code			
	Mckinney, TX 75071			
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	l ;)	
retired		Not Employed	,	
		. ,		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 9/188 Rpt: 12/260	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
Collin Count	y Democratic Party		00054753	
4 Date	5 Full name of contributor out-of-state PAC (ID#		7 Amount of Contribution (\$)	
05/20/2024	Beene, Mike		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	Mckinney, TX 75071	· · · · · · · · · · · · · · · · · · ·		
-	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)	
retired		Not Employed		
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
04/20/2024	Beene, Mike		\$2	25.00
	Contributor address; City; State; Zip Code			
	Malianay TV 75071			
Drizpinal apou	Mckinney, TX 75071			
retired	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)	
Date		:)	Amount of Contribution (\$)	
03/20/2024	Beene, Mike		- φ∠	25.00
	Contributor address; City; State; Zip Code			
	Mckinney, TX 75071			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
retired	•	Not Employed	,	
Date	Full name of contributor Out-of-state PAC (ID#	<u> </u>	Amount of Contribution (\$)	
06/20/2024	Beene, Mike	·	.,	25.00
	Contributor address; City; State; Zip Code			
	Mckinney, TX 75071			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
retired		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	······	Amount of Contribution (\$)	
06/27/2024	Bejtovic, Suad		\$1	L0.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75034			
-	Ipation / Job title (See Instructions)	Employer (See Instructions		
Photographe	۶۲ 	Suad Bejtovic Photogra	pny	

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	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/188 Rpt: 13/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		ty Democratic Party				00054753	
	Date		out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/22/2024	Bell, Sarah					\$15.00
		6 Contributor address; City; State; Zip Code					
		Mckinney, TX 75071					
		upation / Job title (See Instructions)		9 Employer (See Instructions	s)		
	Retired			Retired			
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/25/2024 Bender, Larel						\$411.14
		Contributor address; City; State;			1		
		Makingay TV 75071					
	Dringing occ	Mckinney, TX 75071		Employer (Soo Instructions	<u> </u>		
	principal occu n/a	upation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
				Not Employed	<del></del>		
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢100.00
	01/27/2024	Blackburn, Kelly					\$199.00
		Contributor address; City; State;	Zip Code				
		Waxahachie, TX 75165					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	s)		
	Paralegal			Durham Pittard & Spald	ling	LLP	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/23/2024	Blackburn, Kelly					\$55.00
		Contributor address; City; State;	Zip Code		1		
		Waxahachie, TX 75165		/2	Ļ		
		upation / Job title (See Instructions)		Employer (See Instructions			
	Paralegal	<del>.                                    </del>	]	Durham Pittard & Spald	ling		
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷= 00
	05/31/2024	Bledsoe, Ryan					\$5.00
		Contributor address; City; State;	Zip Code				
		Mckinney, TX 75069					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>।</u> इ)		
	Artist			Resonating threads stud			
-					-		

The Instruction Guid	de explains how to	orm.	1 Total pages Schedule A1: Sch: 11/188 Rpt: 14/260	
2 FILER NAME				<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democrat	tic Party			00054753
4 Date 5 Full nam	ne of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/31/2024 Bledsoe	Bledsoe, Ryan			\$5.00
6 Contribu	utor address; City; State;		·	
		·		
	ey, TX 75069			
8 Principal occupation / Job	title (See Instructions)		9 Employer (See Instructions	
Artist			Resonating threads stud	dio
	ne of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2024 Bledsoe	e, Ryan			\$5.00
Contribu	utor address; City; State;			1
Mekinn				
	ey, TX 75069		Employer (See Instructions	~
Principal occupation / Job Artist			Resonating threads stud	
				1
		out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$5.00
	e, Ryan	Zin Codo		φυ.υ.
Continuo	utor address; City; State;	Zip Code		
Mckinn	ey, TX 75069			
Principal occupation / Job	title (See Instructions)		Employer (See Instructions	s)
Artist			Resonating threads stud	dio
Date Full nam	ne of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/31/2024 Bledso	e, Ryan			\$5.00
Contribu	utor address; City; State;	Zip Code		
	ey, TX 75069			
Principal occupation / Job	title (See Instructions)		Employer (See Instructions	,
Artist			Resonating threads stud	dio
		out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/29/2024 Bledso	e, Ryan			\$5.00
Contribu	utor address; City; State;	Zip Code		
Mekinn	TV 75060			
	ey, TX 75069		Employer (Cap Instructions	-
Principal occupation / Job Artist	title (See Instructions)		Employer (See Instructions Resonating threads stud	
Aiusi			Resolialing inicaus suc	

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 12/188 Rpt: 15/260		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
[		Collin County Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/25/2024	Bojorquez, Siria				\$205.67
		6 Contributor address; City; State; Zip Code				
		El Paso, TX 79924				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Self Employe	ed	Self Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/23/2024	Bolt, John				\$60.00
		Contributor address; City; State; Zip Code		1		
		Fairview, TX 75069				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	, , , , ,	Retired	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	01/13/2024	Bolt, John	)		Amount of Contribution (\$)	\$60.00
	01/13/2024	·				Φ00.00
		Contributor address; City; State; Zip Code				
		Fairview, TX 75069				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Retired		Retired	,		
				<u> </u>	American the formation (d)	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#</b> CO 00
	02/13/2024	Bolt, John				\$60.00
		Contributor address; City; State; Zip Code				
		Fairview, TX 75069				
_	Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired	5)		
╘			Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/13/2024	Bolt, John				\$60.00
		Contributor address; City; State; Zip Code				
		Fairview, TX 75069				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			

	The Instru	ction Guide explains how	orm.	1	Total pages Schedule A1: Sch: 13/188 Rpt: 16/260		
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		ty Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	03/13/2024	Bolt, John					\$60.00
		6 Contributor address; City; State; Zip Code					
8	Principal occu	Fairview, TX 75069 upation / Job title (See Instructions)	<u>,                                     </u>	9 Employer (See Instructions	<u>ا</u>		
Ő	Retired Retired			5)			
	Date	Full name of contributor			Т	Amount of Contribution (\$)	
	04/13/2024	Bolt, John		)			\$60.00
	07/10/202 .	Contributor address; City; Sta			-		φ00.00
		Fairview, TX 75069					
	Principal occu	upation / Job title (See Instructions)	)	Employer (See Instructions	S)		
	Retired			Retired			
	Date Full name of contributor out-of-state PAC (ID#:)			)	Γ	Amount of Contribution (\$)	
	05/13/2024	Bolt, John					\$60.00
		Contributor address; City; Sta			]		
		Fairview, TX 75069					
$\vdash$	Princinal occu	upation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>ا</u>		
	Retired		, 	Retired	5)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	05/08/2024	Bowling, Crystal				,	\$120.00
			ate; Zip Code		1		
		-	· ·				
		McKinney, TX 75069					
		upation / Job title (See Instructions)	)	Employer (See Instructions	s)		
	sales			Oakstreet nursery			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	± · · · · · · · · · · · · · · · · · · ·
	04/08/2024	Bowling, Crystal					\$120.00
		Contributor address; City; Sta	ate; Zip Code				
		McKinney, TX 75069					
⊢	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	L S)		
	sales		I	Oakstreet nursery			
⊢							

	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A1: Sch: 14/188 Rpt: 17/260		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
_		ty Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/08/2024	Bowling, Crystal				\$120.00
		6 Contributor address; City; State; Zip Code		1		
		McKinney, TX 75069				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	sales		Oakstreet nursery			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/08/2024	Bowling, Crystal				\$120.00
		Contributor address; City; State; Zip Code		1		
		McKinney, TX 75069				
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
	sales	1	Oakstreet nursery			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/08/2024	Bowling, Crystal				\$120.00
		Contributor address; City; State; Zip Code		1		
		McKinney, TX 75069				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	sales		Oakstreet nursery			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	01/08/2024	Bowling, Crystal				\$120.00
		Contributor address; City; State; Zip Code		1		
		McKinney, TX 75069				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	sales		Oakstreet nursery			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	01/27/2024	Bradford, Robert				\$10.53
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75074				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Arbitrator	1	Retired			
			1			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 15/188 Rpt: 18/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party	00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
	02/27/2024	Bradford, Robert		\$10.5
		6 Contributor address; City; State; Zip Code		
		Plano, TX 75074	-	
8		pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Arbitrator		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/27/2024	Bradford, Robert		\$10.5
		Contributor address; City; State; Zip Code		
		Plano, TX 75074	-	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Arbitrator		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	05/27/2024	Bradford, Robert		\$10.5
		Contributor address; City; State; Zip Code		
		Plano, TX 75074		
		pation / Job title (See Instructions)	Employer (See Instructions	15)
	Arbitrator		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	04/27/2024	Bradford, Robert		\$10.5
		Contributor address; City; State; Zip Code		
		Plano, TX 75074		
		pation / Job title (See Instructions)	Employer (See Instructions	15)
	Arbitrator		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/27/2024	Bradford, Robert		\$10.5
		Contributor address; City; State; Zip Code		
$\vdash$	Delectrol	Plano, TX 75074	Employee (Or a last di	
		pation / Job title (See Instructions)	Employer (See Instructions	IS)
	Arbitrator		Retired	
1				

The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 16/188 Rpt: 19/260			
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	y Democratic Party			ľ	00054753	1 11010)
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
04/03/2024	Britson, Kelly	—				\$46.96
	6 Contributor address; City; State; Zip Code					
	Allen, TX 75013					
8 Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		
Strategic Ac	count Mgr		Coveo			
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
04/29/2024	Bryant, Karen		/			\$5.00
	Contributor address; City; St					
	Allen, TX 75002					
Principal occu	pation / Job title (See Instructions	:)	Employer (See Instructions	<u>ا</u>		
	tions Manager	<i>)</i>	MedAssets	3)		
	-			-		
Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
05/29/2024	Bryant, Karen					\$5.00
	Contributor address; City; St	tate; Zip Code				
	Allen, TX 75002					
Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
Communica	tions Manager		MedAssets			
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
03/29/2024	Bryant, Karen					\$5.00
		tate <sup>.</sup> Zin Code				
	Allen, TX 75002					
Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
Communica	tions Manager		MedAssets			
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Г	Amount of Contribution (\$)	
02/29/2024	Bryant, Karen	OUI-OI-SIAIE PAC (ID#	)			\$5.00
02/29/2024						φ5.00
	Contributor address; City; St	tate; Zip Code				
	Allen, TX 75002					
	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
Communica	tions Manager		MedAssets			

The l	Instru	ction Guide explains how to complet	1	Total pages Schedule A1: Sch: 17/188 Rpt: 20/260			
2 FILER	RNAME				3	Filer ID (Ethics Commission	n Filers)
		/ Democratic Party				00054753	,
4 Date		5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	
01/29	9/2024	Bryant, Karen					\$5.00
		6 Contributor address; City; State; Zip Code			1		
		Allen, TX 75002	——————————————————————————————————————				
-		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	municai	ions Manager	<u> </u>	MedAssets			
Date		—	PAC (ID#:	)		Amount of Contribution (\$)	. –
06/29	/29/2024 Bryant, Karen				]		\$5.00
		Contributor address; City; State; Zip Code					
		Allen, TX 75002					
Princir	nal occu	pation / Job title (See Instructions)	r	Employer (See Instructions	<u> </u>		
	Communications Manager MedAssets				>)		
Date					Τ	Amount of Contribution (\$)	
	7/2024	Bulkeley, Michael	PAC (ID#	)			\$411.14
01/2.	1202-				$\mathbf{I}$		ψτιτιτι
		Continuation address, Only, State, Zip Code					
		Richardson, TX 75082					
Princip	pal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Retire	ed			Retired			
Date		Full name of contributor out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
05/18	3/2024	Burgan, Virginia					\$20.85
		Contributor address; City; State; Zip Code			1		
		5-1000 TV 75095					
Princir		Frisco, TX 75035 pation / Job title (See Instructions)	r	Employer (See Instructions	<u> </u>		
	nployed			Unemployed	5)		
					<del>.</del>		
Date	3/2024	Full name of contributor out-of-state I Burgan, Virginia	PAC (ID#:	)		Amount of Contribution (\$)	\$20.85
04/10	5/2024						<b>Φ</b> 20.05
		Contributor address; City; State; Zip Code					
		Frisco, TX 75035					
Princip	pal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Unem	nployed			Unemployed			
			I				

_					-		
	The Instru	ction Guide explains how to c	orm.	1	Total pages Schedule A1: Sch: 18/188 Rpt: 21/260		
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	Collin Count	y Democratic Party				00054753	-
4	Date	5 Full name of contributor 🗌 o	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/18/2024	Burgan, Virginia					\$20.85
	I	6 Contributor address; City; State; Zip Code					
	I						
	l						
		Frisco, TX 75035					
8		pation / Job title (See Instructions)	· · · · · · · · · · · · · · · · · · ·	9 Employer (See Instructions	5)		
	Unemployed			Unemployed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/11/2024	Burgan, Virginia					\$205.67
	I	Contributor address; City; State; Z					
	I						
	l						
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Unemployed	I		Unemployed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/22/2024	Burgan, Virginia					\$81.27
	l	Contributor address; City; State; Z	Zip Code				
	l		r.				
	l						
	I	Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Unemployed	1		Unemployed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/19/2024	Burns, Macey	· _			• -	\$60.00
	I						
	I						
	l						
	I	Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Stylist			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/19/2024	Burns, Macey	· _			• -	\$60.00
	I	Contributor address; City; State; Z	7in Code				
	I	ooning and a set, end, end,	The code				
	I						
	l	Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
	Stylist	· · · ·		Self			
			L				
4							

	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule Sch: 19/188 Rpt: 22	
2	FILER NAME			3 Filer ID (Ethics Com	mission Filers)
		y Democratic Party	00054753		
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contributio	on (\$)
	06/19/2024	Burns, Macey			\$60.00
		6 Contributor address; City; State; Zip Code			
	Dringinglassy	Allen, TX 75002	Contraction	\ \	
8	Stylist	pation / Job title (See Instructions)	9 Employer (See Instruction: Self	)	
	Date		#:)	Amount of Contributio	
	01/16/2024	Burns, Macey			\$10.53
		Contributor address; City; State; Zip Code			
		Allen, TX 75002			
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	)	
	Stylist		Self	,	
╞	Date	Full name of contributor Out-of-state PAC (ID#	)	Amount of Contributio	on (\$)
	02/16/2024	Burns, Macey	//		\$10.53
		Contributor address; City; State; Zip Code			
		Allen, TX 75002			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	)	
	Stylist		Self		
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	#:)	Amount of Contributio	on (\$)
	06/16/2024	Burns, Macey			\$10.53
		Contributor address; City; State; Zip Code			
L	Dringing ogg	Allen, TX 75002	Employer (See Instruction	<b>)</b>	
	Stylist	pation / Job title (See Instructions)	Employer (See Instruction: Self	)	
╞	-			American of Constributio	
	Date 03/16/2024	Full name of contributor out-of-state PAC (ID# Burns, Macey	¢:)	Amount of Contributio	\$10.53
	03/10/2024	-			\$10.55
		Contributor address; City; State; Zip Code			
		Allen, TX 75002			
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instruction	)	
	Stylist		Self		
⊢			1		

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	The Instru	ction Guide explains how to complete t	his fo	rm.	1	Total pages Schedule A1: Sch: 20/188 Rpt: 23/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		County Democratic Party			ľ	00054753	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:	)	7	Amount of Contribution (\$)	
	05/16/2024	Burns, Macey					\$10.53
		6 Contributor address; City; State; Zip Code			1		
		Allen, TX 75002					
8	Principal occu	pation / Job title (See Instructions)	ę	B Employer (See Instructions	5)		
	Stylist			Self			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:	)	Γ	Amount of Contribution (\$)	
	04/16/2024	Burns, Macey					\$10.53
		Contributor address; City; State; Zip Code			1		
		Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Stylist			Self			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:	)	Γ	Amount of Contribution (\$)	
	02/14/2024	Burns, Macey					\$278.98
		Contributor address; City; State; Zip Code			1		
		Allen, TX 75002					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Stylist			Self			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	03/19/2024	Burns, Macey					\$40.94
		Contributor address; City; State; Zip Code			1		
		Allen, TX 75002					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Stylist			Self	-		
	Date	Full name of contributor 🛛 out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	06/03/2024	Burns, Macey					\$40.94
		Contributor address; City; State; Zip Code			]		
$\vdash$		Allen, TX 75002			Ļ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Stylist			Self			
1							

	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 21/188 Rpt: 24/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party	00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
	05/10/2024	Burns, Macey		\$40.94
		6 Contributor address; City; State; Zip Code		
		Allen, TX 75002		
8		pation / Job title (See Instructions)	9 Employer (See Instruction	าร)
	Stylist		Self	
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	06/26/2024	Burns, Macey		\$20.00
		Contributor address; City; State; Zip Code		
		Allen, TX 75002		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)
	Stylist		Self	
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	01/19/2024	Burns, Macey		\$60.00
		Contributor address; City; State; Zip Code		
		Allen, TX 75002		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	ns)
	Stylist		Self	
	Date	Full name of contributor out-of-state PAC (ID#	;)	Amount of Contribution (\$)
	04/19/2024	Burns, Macey		\$60.00
		Contributor address; City; State; Zip Code		
		Allen, TX 75002		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	ns)
	Stylist		Self	
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	03/19/2024	Burns, Macey		\$60.00
		Contributor address; City; State; Zip Code		
		Allen, TX 75002		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	is)
	Stylist		Self	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 22/188 Rpt: 25/260	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	y Democratic Party		00054753	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/09/2024	Burns, Nicholas		g	\$25.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	 }	
Attorney		Shamoun & Norman LLF		
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
05/09/2024	Burns, Nicholas	)		\$25.00
03/03/2024			Ň	φ20.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Attorney		Shamoun & Norman LLF		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/09/2024	Burns, Nicholas			\$25.00
	Dallas, TX 75204			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Attorney		Shamoun & Norman LLF	>	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/09/2024	Burns, Nicholas		Q	\$25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
· ·	upation / Job title (See Instructions)	Employer (See Instructions)		
Attorney		Shamoun & Norman LLF	>	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/09/2024	Burns, Nicholas		g	\$25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75204	l		
	ipation / Job title (See Instructions)	Employer (See Instructions)		
Attorney		Shamoun & Norman LLF	>	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 23/188 Rpt: 26/260	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	y Democratic Party		00054753	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
03/09/2024	Burns, Nicholas			\$25.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75204			
9 Dringingloog	upation / Job title (See Instructions)	9 Employer (See Instructions		
Attorney		Shamoun & Norman LL		
Date		)	Amount of Contribution (\$)	
06/27/2024	Bustos, Georgiana			\$25.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	6)	
Baker		Self employed		
Date	Full name of contributor out-of-state PAC (ID#:	· )	Amount of Contribution (\$)	
01/12/2024	Cardell 4 Congress			\$411.14
	Contributor address; City; State; Zip Code			
	Aubrey, TX 76227			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/18/2024	Carlyle, Justice Cory			\$205.67
	Contributor address; City; State; Zip Code			
	Rockwall, TX 75032			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)	
Justice		Texas Fifth Court of App		
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
03/22/2024		)	Amount of Contribution (\$)	\$51.83
03/22/2024				φ01.00
	Contributor address; City; State; Zip Code			
	Plana TX 75002			
Driveirellese	Plano, TX 75093			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 24/188 Rpt: 27/260	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	01/23/2024	Carstens, David				\$2,065.20
		6 Contributor address; City; State; Zip Code				
		Plano, TX 75093				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	attorney		Carstens, Allen & Gourl	ley,	LLP	
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	01/24/2024	Carter, Betsy				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093	-			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired Attor	ney	Retired			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	03/24/2024	Carter, Betsy				\$10.00
		Contributor address; City; State; Zip Code		"		
		Plano, TX 75093				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired Attor	ney	Retired			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	02/24/2024	Carter, Betsy				\$10.00
		Contributor address; City; State; Zip Code				
	Deineineleen	Plano, TX 75093				
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired Attor		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	03/27/2024	Casavant, Catherine				\$113.20
		Contributor address; City; State; Zip Code				
		Dieno TV ZEOZE				
⊢	Dringinglas	Plano, TX 75075				
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊢	UFA		Realpage			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 25/188 Rpt: 28/260	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	ers)
	ty Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/04/2024	Casavant, Catherine			\$25.00
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75075		-	
-	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
CPA		Realpage		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/25/2024	Casavant, Michael			\$35.34
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Product Mar	nager	JPMorgan Chase		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/03/2024	Casavant, Michael		\$	149.20
	Contributor address; City; State; Zip Code			
Dringinglass	Plano, TX 75075		\	
Principal occu Product Mar	upation / Job title (See Instructions)	Employer (See Instructions JPMorgan Chase	5)	
			r	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/21/2024	Casavant, Michael		\$	258.32
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	) ;)	
Product Mar		JPMorgan Chase		
		,	Amount of Contribution (ft)	
Date 03/21/2024	Full name of contributor out-of-state PAC (ID#: Casavant, Michael	)	Amount of Contribution (\$)	258.32
03/21/2024			پ.	230.32
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	l	
Product Mar		JPMorgan Chase	,	
	-			

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 26/188 Rpt: 29/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party			00054753	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID#	ŧ:)	7	Amount of Contribution (\$)	
	01/21/2024	Casavant, Michael				\$258.32
		6 Contributor address; City; State; Zip Code				
		Plano, TX 75075				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Product Mar	ager	JPMorgan Chase			
	Date	Full name of contributor out-of-state PAC (ID#	+:)	Τ	Amount of Contribution (\$)	
	01/24/2024	Casavant, Michael				\$205.67
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Product Mar	ager	JPMorgan Chase			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	ŧ:)	Τ	Amount of Contribution (\$)	
	01/25/2024	Casavant, Michael				\$205.67
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75075				
		pation / Job title (See Instructions)	Employer (See Instructions	IS)		
	Product Mar		JPMorgan Chase			
	Date		#:)		Amount of Contribution (\$)	
	06/21/2024	Casavant, Michael				\$258.32
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	IS)		
	Product Mar	ager	JPMorgan Chase			
	Date	Full name of contributor out-of-state PAC (ID#		Т	Amount of Contribution (\$)	
	05/21/2024	Casavant, Michael	·/			\$258.32
		Contributor address; City; State: Zip Code		•		
		Plano, TX 75075				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Product Mar	ager	JPMorgan Chase			
			•			

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	The Instru	ction Guide explains how to comple	ete this for	r <b>m.</b>	1	Total pages Schedule A1: Sch: 27/188 Rpt: 30/260	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/21/2024	Casavant, Michael					\$258.32
	I	6 Contributor address; City; State; Zip Code					
		1					
		Plano, TX 75075					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	.)		
	Product Man	ager		JPMorgan Chase			
	Date	Full name of contributor out-of-state	• PAC (ID#:	)		Amount of Contribution (\$)	
	04/20/2024	Caspari, Leaca					\$30.00
	1	Contributor address; City; State; Zip Code					
		1					
		1					
		Farmersville, TX 75442					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor out-of-state	• PAC (ID#:	)		Amount of Contribution (\$)	
	03/20/2024	Caspari, Leaca					\$30.00
	I	Contributor address; City; State; Zip Code					
		1					
		Farmersville, TX 75442					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
╞	Date	Full name of contributor Out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	01/20/2024	Caspari, Leaca		/		· · · · · · · · · · · · · · · · · · ·	\$30.00
	•	Contributor address; City; State; Zip Code					Ŧ
		1					
		Farmersville, TX 75442					
	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Retired	-		Retired			
⊨	Date	Full name of contributor out-of-state		)	—	Amount of Contribution (\$)	
	06/20/2024	Caspari, Leaca	T AO (18	/		/ inouni or contraction (+,	\$30.00
	00,20,20	Contributor address; City; State; Zip Code					+•
		Contributor address, City, State, Zip Coue					
		1					
		Farmersville, TX 75442					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired			Retired	)		
⊢	Reulea		L				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 28/188 Rpt: 31/260	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	y Democratic Party		00054753	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/20/2024	Caspari, Leaca		\$3	30.00
	6 Contributor address; City; State; Zip Code			
	Farmersville, TX 75442			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/20/2024	Caspari, Leaca		\$3	30.00
	Contributor address; City; State; Zip Code			
	Farmersville, TX 75442			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		Retired		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/19/2024	Cetera, Joan	)		59.51
01/13/2024			ΨΟ.	00.01
	Contributor address; City; State; Zip Code			
	Frisco, TX 75036			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	)	
Writer		Рер	,	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/24/2024	Chang, Helen	)		20.00
00/24/2024	-		Ψ.	20.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75093			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	)	
Faculty		Dallas college		
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/24/2024	Chang, Helen	)		20.00
00/24/2024	Contributor address; City; State; Zip Code		Ψ.	20.00
	Contributor address, City, State, Zip Code			
	Plano, TX 75093			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Faculty		Dallas college	,	

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 29/188 Rpt: 32/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/24/2024	Chang, Helen					\$20.00
		6 Contributor address; City; State			1		
_	Dringinglassy	Plano, TX 75093					
ð	Faculty	pation / Job title (See Instructions)		9 Employer (See Instructions Dallas college	5)		
	-			_	-		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>†</b> 00.00
	03/24/2024	Chang, Helen					\$20.00
		Contributor address; City; State	e; Zip Code				
		Plano, TX 75093					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Faculty			Dallas college	-)		
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	04/24/2024	Chang, Helen		)			\$20.00
	•		a. Zin Code				+20.00
			, zip 0000				
		Plano, TX 75093					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Faculty			Dallas college			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/24/2024	Chang, Helen					\$20.00
		Contributor address; City; State			1		
		Diana TV 75002					
	Dringing ogg	Plano, TX 75093		Employer (See Instructions	$\frac{1}{2}$		
	Faculty	pation / Job title (See Instructions)		Dallas college	>)		
	-		1		<u> </u>		
	Date 02/10/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	02/10/2024		v Zin Codo				φ25.00
		Contributor address; City; State	e, zip Code				
		Murphy, TX 75094					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Educator			Dallas College			

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 30/188 Rpt: 33/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#	ŧ:)	7 Amount of Contribution (\$)
01/10/2024	Christman, William		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Murphy, TX 75094		
	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Educator		Dallas College	
Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
05/10/2024	Christman, William		\$25.00
	Contributor address; City; State; Zip Code		1
	Murphy, TX 75094		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Educator		Dallas College	
Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
06/10/2024	Christman, William		\$25.00
	Contributor address; City; State; Zip Code		
	Murphy, TX 75094		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Educator		Dallas College	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
04/10/2024	Christman, William		\$25.00
	Contributor address; City; State; Zip Code		1
	Murphy, TX 75094		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Educator		Dallas College	
Date	Full name of contributor 🛛 out-of-state PAC (ID#	ŧ:)	Amount of Contribution (\$)
03/10/2024	Christman, William		\$25.00
	Contributor address; City; State; Zip Code		1
	Murphy, TX 75094		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Educator		Dallas College	

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	The Instru	ction Guide explains how to con	nplete this fo	rm.	1	Total pages Schedule A1: Sch: 31/188 Rpt: 34/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party				00054753	·
4	Date	5 Full name of contributor 🗌 out-of	-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/08/2024	Churchill, Laura					\$411.14
		6 Contributor address; City; State; Zip C			1		
		Plano, TX 75093	I _		Ļ		
8		pation / Job title (See Instructions)	5	9 Employer (See Instructions Detired	5)		
	Retired			Retired			
	Date	<u> </u>	-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/20/2024	Clay, Dinah					\$50.00
		Contributor address; City; State; Zip C			1		
		Plano, TX 75025					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date		-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/30/2024	Cole, Stephanie					\$30.00
		Contributor address; City; State; Zip C			1		
		Plano, TX 75075			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Accountant			Robert Half	-		
	Date		-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/30/2024	Cole, Stephanie					\$30.00
		Contributor address; City; State; Zip C					
		Plano, TX 75075					
	Drincinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> -)		
	Accountant			Robert Half	>)		
				\	1	1	
	Date		-state PAC (ID#:	)		Amount of Contribution (\$)	ቀጋባ ባባ
	04/30/2024						\$30.00
		Contributor address; City; State; Zip C	code				
		Plano, TX 75075					
	Drincinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> -)		
	Accountant			Robert Half	>)		
	Accountant			NUDEILIILII			

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2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Collin Count	y Democratic Party			00054753	
4	Date 06/30/2024	5 Full name of contributor out-of-state PAC (ID#: Cole, Stephanie		7	Amount of Contribution (\$)	\$30.00
		6 Contributor address; City; State; Zip Code				<b>T T T T</b>
		b Contributor address, City, State, Zip Code				
		Plano, TX 75075				
8	Principal occu Accountant	ipation / Job title (See Instructions)	9 Employer (See Instructions) Robert Half	)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/29/2024	Cole, Stephanie				\$30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Accountant		Robert Half			
_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/30/2024	Cole, Stephanie				\$30.00
		Contributor address; City; State; Zip Code				
	Principal OCCI	Plano, TX 75075 Ipation / Job title (See Instructions)	Employer (See Instructions	·)		
	Accountant		Robert Half	)		
⊨				_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>ቀ</u> ንባ በበ
	01/22/2024	College Democrats at UTD				\$30.00
		Contributor address; City; State; Zip Code				
		Richardson, TX 75080				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞╴	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/09/2024	Collin County Young Dems and Muslim Democra	atic Caucus North Dallas		• •	\$495.00
		Contributor address; City; State; Zip Code				
		Wylie, TX 75098				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		

SCHEDULE	A1
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The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 33/188 Rpt: 36/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin County Democratic Party				00054753	
4	Date	Date <b>5</b> Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	
	01/12/2024					\$204.64
		6 Contributor address; City; State; Zip Code		•		
		Wylie, TX 75098				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	03/29/2024	Collins-Wylie, Carolee				\$30.00
	Contributor address; City; State; Zip Code					
	Plano, TX 75074					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date     Full name of contributor     out-of-state PAC (ID#:)       01/02/2024     Cook, Michael			Amount of Contribution (\$)		
					\$199.00	
	Contributor address; City; State; Zip Code					
	Dallas, TX 75252					
			Employer (See Instructions	s)		
	real estate investor Resishares		Resishares			
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	03/23/2024	Corcoran, Joseph				\$30.00
	Contributor address; City; State; Zip Code			"		
	Richardson, TX 75080					
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Analyst		Comerica			
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	05/01/2024	05/01/2024 Cornwallis, Scarlett Contributor address; City; State; Zip Code				\$25.00
				"		
		Prosper, TX 75078				
			Employer (See Instructions			
Engagement Manager Amazon Web Service			Amazon Web Services			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/188 Rpt: 37/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/01/2024	Cornwallis, Scarlett				\$25.00
		<b>6</b> Contributor address; City; State; Zip Code				
		Prosper, TX 75078				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Engagemen	t Manager	Amazon Web Services			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/01/2024	Cornwallis, Scarlett				\$25.00
		Contributor address; City; State; Zip Code		1		
		Prosper, TX 75078				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engagemen	Manager	Amazon Web Services			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/01/2024	Cornwallis, Scarlett				\$25.00
	Contributor address; City; State; Zip Code					
		Prosper, TX 75078				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engagemen	Manager	Amazon Web Services			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/01/2024	Cornwallis, Scarlett				\$25.00
		Contributor address; City; State; Zip Code				
		Prosper, TX 75078				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engagemen	Manager	Amazon Web Services			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/01/2024	Cornwallis, Scarlett				\$25.00
		Contributor address; City; State; Zip Code				
L		Prosper, TX 75078				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engagemen	t Manager	Amazon Web Services			

	The Instru	ction Guide explains how to complete this	is forr	m.	1	Total pages Schedule A1: Sch: 35/188 Rpt: 38/260	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		y Democratic Party				00054753	,
4	Date	5 Full name of contributor out-of-state PAC (IE	D#:	)	7	Amount of Contribution (\$)	
	05/17/2024	Dailey, Colletta					\$25.00
	I	6 Contributor address; City; State; Zip Code					
_		McKinney, TX 75069			Ĺ		
8		ipation / Job title (See Instructions)	Э	Employer (See Instructions	5)		
	Human Serv	vices Specialist		FEMA			
	Date	Full name of contributor 🔲 out-of-state PAC (IE	D#:	)	Γ	Amount of Contribution (\$)	
	01/18/2024	Dalton, Jeff					\$1,000.00
	I	Contributor address; City; State; Zip Code					
		McKinney, TX 75070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Consultant			Self Employed			
-	Date	Full name of contributor Out-of-state PAC (IE		)		Amount of Contribution (\$)	
	02/15/2024	Davis, Larry	Δπ			Allount of Contribution (+)	\$5.00
	021101202-1						Ψ0.00
	Contributor address; City; State; Zip Code						
		Greenville, TX 75401					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	Retired			Retired	"		
					_		
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	<b>#F</b> 00
	06/16/2024	Davis, Larry					\$5.00
		Contributor address; City; State; Zip Code					
	Delectrol coor	Greenville, TX 75401			Ĺ		
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor 🔲 out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	05/16/2024	Davis, Larry					\$5.00
	ł	Contributor address; City; State; Zip Code					
		Greenville, TX 75401					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			

		·					
	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 36/188 Rpt: 39/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			-	00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/24/2024	De Young, Rita					\$10.00
		6 Contributor address; City; State			1		
	ļ						
	ļ						
		Plano, TX 75075					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	3)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/24/2024	De Young, Rita	-				\$10.00
	ļ	Contributor address; City; State; Zip Code					
		-					
	ļ						
	ļ	Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/05/2024	De Young, Rita				, and an element (-)	\$30.00
	00,00,				•		<b>TU</b>
	ļ	Contributor address, ony, cano	, zip couc				
	ļ						
	ļ	Plano, TX 75075					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired	· · · ·		Retired			
-	Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Π	Amount of Contribution (\$)	
	02/24/2024	De Young, Rita	טעו-טו-זגמופ ראכ עושיי	/			\$10.00
	0212712027				-		Ψ10.00
	ļ	Contributor address; City; State	; Zip Coue				
	ļ						
		Plano, TX 75075					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired	,		Retired	-,		
	Date	Full name of contributor		<u> </u>		Amount of Contribution (\$)	
	03/24/2024	De Young, Rita	out-of-state PAC (ID#:	)			\$10.00
	0012412027		y Zin Code				Φτ0.00
	ļ	Contributor address; City; State	;; Zip Code				
	ļ						
		Plano, TX 75075					
_	Drincinal occu			Employor (See Instructions			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Relieu			Reuleu			

	The Instru	ction Guide explains how to complete this	s forr	n.	1	Total pages Schedule A1: Sch: 37/188 Rpt: 40/260	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID	D#:	)	7	Amount of Contribution (\$)	
	04/24/2024	De Young, Rita					\$10.00
		6 Contributor address; City; State; Zip Code					
		Plano, TX 75075					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
	Date		D#:	)		Amount of Contribution (\$)	
	01/24/2024	De Young, Rita					\$10.00
		Contributor address; City; State; Zip Code					
		Diene TV 75075					
⊢	Dringing ago	Plano, TX 75075		Employer (Coo Instructions			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
╘							
	Date	Full name of contributor out-of-state PAC (ID	D#:	)		Amount of Contribution (\$)	<b>#00.00</b>
	03/23/2024	Depew, Sarah					\$30.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75075					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Not Employe			Not Employed	,		
⊨	Date	Full name of contributor Out-of-state PAC (ID	<u> </u>	)		Amount of Contribution (\$)	
	01/20/2024	Dewar, Claire		/			\$1,032.70
		Contributor address; City; State; Zip Code					
		Dallas, TX 75209					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:	)		Amount of Contribution (\$)	
	02/26/2024	Dickson, Erin					\$95.68
		Contributor address; City; State; Zip Code					
		Plano, TX 75025			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Self employe	20		Self			
l							

	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 38/188 Rpt: 41/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (II	ID#:)	7	Amount of Contribution (\$)	
	01/17/2024	Dishong, Judith				\$179.86
	I	6 Contributor address; City; State; Zip Code		1		
	I					
	l					
		Plano, TX 75023				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired		Retired	_		
Γ	Date		ID#:)	Τ	Amount of Contribution (\$)	
	01/17/2024	Donald, Stacey				\$411.14
	I	Contributor address; City; State; Zip Code				
	I					
	l	Plano, TX 75075				
┝	Principal occur	pation / Job title (See Instructions)	Employer (See Instructions			
	Professor		DeVry University	5)		
╞		Full name of contributor Out-of-state PAC (II			Amount of Contribution (\$)	
	Date 01/22/2024	Full name of contributor out-of-state PAC (II Dostaliyeva, Kristina	D#:)		Amount of Contribution (\$)	\$359.51
	0112212024	-				4009.0±
	l	Contributor address; City; State; Zip Code				
	l					
	l	Plano, TX 75025				
┢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Trainer/proce	ess improvement manager	JPMC			
F	Date	Full name of contributor out-of-state PAC (II	ID#:)	Г	Amount of Contribution (\$)	
	03/06/2024	Dostaliyeva, Kristina				\$340.51
	I	Contributor address; City; State; Zip Code		1		
	l					
	l					
	<u> </u>	Plano, TX 75025		Ĺ		
	•	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	•	ess improvement manager	JPMC	—		
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	<b>*</b> 20.00
	02/01/2024	Duffy, Margaret				\$30.00
		Contributor address; City; State; Zip Code				
	I					
	l	Plano, TX 75023				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ل</u> (د		
	Software Tra		Rediker Software, Inc.	5)		
$\vdash$						

	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 39/188 Rpt: 42/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		ty Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/18/2024	Edgar, Robert				\$10.00
	I	6 Contributor address; City; State; Zip Code		·		
		1				
		1				
		Mckinney, TX 75072				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	01/18/2024	Edgar, Robert				\$10.00
	I	Contributor address; City; State; Zip Code		·		
		1				
		Mckinney, TX 75072				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
╞	Date	Full name of contributor out-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	
	04/18/2024	Edgar, Robert				\$10.00
	I	Contributor address; City; State; Zip Code		·		
		1				
		Mckinney, TX 75072				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Retired		Retired			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	05/18/2024	Edgar, Robert	/		, and an el	\$10.00
	00,20,20	Contributor address; City; State; Zip Code		·		<b>*-</b>
		Contributor address, City, State, Zip Code				
		1				
		Mckinney, TX 75072				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Retired	,	Retired			
⊢	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u> )	Τ	Amount of Contribution (\$)	
	02/18/2024	Edgar, Robert	/		Allount of Contribution (+)	\$10.00
	02,20,2.2	Contributor address; City; State; Zip Code				<b>*=•</b>
		Continuation address, City, State, Lip Code				
		1				
		Mckinney, TX 75072				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Retired		Retired	3)		
$\vdash$						

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 40/188 Rpt: 43/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	06/18/2024	Edgar, Robert				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Mckinney, TX 75072				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#)	:)		Amount of Contribution (\$)	
	03/20/2024	Elect Darrel Evans				\$50.00
		Contributor address; City; State; Zip Code		]		
		Mckinney, TX 75069		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
	05/31/2024	Elkins, Sandra				\$34.00
		Contributor address; City; State; Zip Code				
L	<b>D</b> 1	Plano, TX 75025		Ĺ		
		pation / Job title (See Instructions) cher for youth	Employer (See Instructions Self	S)		
		-		-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/03/2024	Elliott, Patricia				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ر)</u>		
	Not Employe		Not Employed	3)		
╞				Т	1	
	Date 03/03/2024	Full name of contributor out-of-state PAC (ID#)	)		Amount of Contribution (\$)	\$10.00
	03/03/2024					ΦΤΟ'ΟΟ
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Not Employe		Not Employed	.,		
-						

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/188 Rpt: 44/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/03/2024	Elliott, Patricia					\$10.00
	1	6 Contributor address; City; St	ate; Zip Code		1		
	I						
	I						
		Plano, TX 75075		1			
8		pation / Job title (See Instructions)	)	9 Employer (See Instructions	5)		
	Not Employe	.d		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	_
	04/03/2024						\$10.00
	Contributor address; City; State; Zip Code						
	I						
	I	Plano, TX 75075					
_	Principal occu	pation / Job title (See Instructions)	- <u>\</u>	Employer (See Instructions	<u> </u>		
	Not Employe		,	Not Employed	5)		
╞				T	Amount of Contribution (\$)		
	05/03/2024	Elliott, Patricia	out-of-state PAC (ID#:	)			\$10.00
		Contributor address; City; Sta			ł		Ψ10.00
	I		ale, Zip Coue				
	l						
	l	Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Not Employe	ed .		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/03/2024	Elliott, Patricia					\$10.00
	I	Contributor address; City; Sta	tate; Zip Code		1		
	I						
	l						
$\vdash$	Drinsipal appr	Plano, TX 75075					
	Principal occu Not Employe	pation / Job title (See Instructions)	)	Employer (See Instructions Not Employed	5)		
╘					1		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<u> </u>
	01/22/2024	Evans, Darrel					\$411.14
	I	Contributor address; City; Sta	ate; Zip Code				
	I						
	I	Mckinney, TX 75069					
⊢	Principal occu	pation / Job title (See Instructions)	;)	Employer (See Instructions	L 5)		
	Sales	· · · ·	,	Dealer eProcess	,		
⊢							

	The Instru	ction Guide explains how	ı to complete this f	orm.	1 Total pages Schedule A1: Sch: 42/188 Rpt: 45/260			
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)	
-		y Democratic Party				00054753		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)		
	01/16/2024	Ezeonu, Junior					\$205.67	
	I	6 Contributor address; City; Sta	tate; Zip Code		1			
		Grand Prairie, TX 75052						
8	Principal occu	pation / Job title (See Instructions)	<i>i</i> )	9 Employer (See Instructions	<u>.</u> s)			
	Political Man	lager		СС				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	03/27/2024	Fee, Manson	—				\$36.94	
	I	Contributor address; City; State; Zip Code						
		Mckinney, TX 75072						
	Principal occu	pation / Job title (See Instructions)	.(ذ	Employer (See Instructions	<u> </u>			
	Not Employe	эd		Not Employed				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	03/20/2024	Fehlbaum, Kristen					\$36.94	
	-		tate: Zip Code		•		•	
		Dallas, TX 75206						
	Principal occu	pation / Job title (See Instructions)	.(ذ	Employer (See Instructions	<u> </u>			
	RN			Methodist Health System	m			
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	06/20/2024	Ferguson, Rebecca		,		,	\$10.00	
	• • • • • •		tate: Zin Code				Ŧ -	
		Wylie, TX 75098						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	Retired			Retired				
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)		
	02/20/2024	Ferguson, Rebecca				· -	\$10.00	
	I	Contributor address; City; Sta	tate: Zip Code		ł			
			40, <u>-</u> p 2000					
		Wylie, TX 75098						
⊢	Principal occu	I pation / Job title (See Instructions)	 ټ)	Employer (See Instructions	<u> </u>			
	Retired	·		Retired	-			
4								

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	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 43/188 Rpt: 46/260	
2	FILER NAME			3 Filer ID (Ethics Commission Filers	5)
		y Democratic Party		00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
	05/20/2024	Ferguson, Rebecca		\$10	0.00
		6 Contributor address; City; State; Zip Code			
		Wylie, TX 75098			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
	Retired		Retired		
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
	01/20/2024	Ferguson, Rebecca		\$10	0.00
		Contributor address; City; State; Zip Code			
		Wylie, TX 75098			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Retired		Retired		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	03/20/2024	Ferguson, Rebecca		\$10	0.00
		Contributor address; City; State; Zip Code			
		Wylie, TX 75098			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Retired		Retired		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	04/20/2024	Ferguson, Rebecca		\$10	0.00
		Contributor address; City; State; Zip Code			
		Wylie, TX 75098			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Retired		Retired		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	04/04/2024	Finley, Mary Jo		\$100	0.00
		Contributor address; City; State; Zip Code			
		Plano, TX 75074			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;) ;)	
	Retired		Retired		
-					

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/188 Rpt: 47/260	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		y Democratic Party			ľ	00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/05/2024	Flanary, Donald					\$34.00
		6 Contributor address; City; Sta			1		
		Mc Kinney, TX 75070					
8		pation / Job title (See Instructions)		9 Employer (See Instructions Self Employed	5)		
	Attorney						
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/16/2024	Flanary, Donald					\$413.20
		Contributor address; City; Sta			1		
		Mc Kinney, TX 75070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ו</u> ג)		
	Attorney			Self Employed	,		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/18/2024	Flanary, Donald					\$2,250.00
		Contributor address; City; Sta			]		
		Mc Kinney, TX 75070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Attorney			Self Employed			
_	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	02/28/2024	Flores, Edna	OUI-OI-SIAIE PAC (ID#	)			\$159.28
	02/20/2024	·					Φ109.20
		Contributor address; City; Sta	ate; Zip Code				
		Irving, TX 75062					
	Drinoinal again			Employer (See Instructions	<u> </u>		
		pation / Job title (See Instructions)			5)		
	Accountant			ClubCorp			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/23/2024	Flores, Jared					\$62.15
		Contributor address; City; Sta	ate; Zip Code				
		-					
		Plano, TX 75075					
-	Principal occu	L pation / Job title (See Instructions)		Employer (See Instructions	1 5)		
	Director of A			American Arbitration As		ciation	
_	2.100001 0174	2					
l l							ſ

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 45/188 Rpt: 48/260	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
Collin Count	y Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/23/2024	Flores, Jared			\$62.15
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75075			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Director of A	DR Services	American Arbitration As	sociation	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/23/2024	Flores, Jared			\$62.15
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Director of A	DR Services	American Arbitration As	sociation	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/23/2024	Flores, Jared			\$62.15
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	6)	
Director of A	DR Services	American Arbitration As	sociation	
Date	Full name of contributor out-of-state PAC (ID#:	· )	Amount of Contribution (\$)	
03/23/2024	Flores, Jared			\$30.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
Director of A	DR Services	American Arbitration As	sociation	
Date	Full name of contributor out-of-state PAC (ID#:_	· )	Amount of Contribution (\$)	
06/20/2024	Flores, Jared			\$73.27
	Contributor address; City; State; Zip Code			
	Plano, TX 75075			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Director of A	DR Services	American Arbitration As	sociation	

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 46/188 Rpt: 49/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
01/06/2024	Fowlkes, Kathryn		\$411.14
	6 Contributor address; City; State; Zip Code		•
	Mckinney, TX 75072	-	
-	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/11/2024	Fox, Carolyn		\$25.00
	Contributor address; City; State; Zip Code		1
Drizzinal again	Plano, TX 75023		-
Principal occu Microbiologis	ipation / Job title (See Instructions)	Employer (See Instructions Crisp Analytical Labs	5)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/11/2024			\$25.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	5)
Microbiologis		Crisp Analytical Labs	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/11/2024	Fox, Carolyn		\$25.00
	Contributor address; City; State; Zip Code		•
	Plano, TX 75023		
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Microbiologis	st	Crisp Analytical Labs	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/11/2024	Fox, Carolyn		\$25.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023	1	
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Microbiologis	st	Crisp Analytical Labs	

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 47/188 Rpt: 50/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	1 11010)
4	Date	5 Full name of contributor out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	05/11/2024	Fox, Carolyn				\$25.00
		6 Contributor address; City; State; Zip Code				
		Plano, TX 75023				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Microbiologis	st	Crisp Analytical Labs			
	Date	Full name of contributor out-of-state PAC (ID#	· ·)		Amount of Contribution (\$)	
	06/11/2024	Fox, Carolyn				\$25.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Microbiologis	st	Crisp Analytical Labs			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	01/28/2024	Foy, James				\$25.00
		Contributor address; City; State; Zip Code				
		Farmersville, TX 75442				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Owner		Foy Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	05/28/2024	Foy, James				\$25.00
		Contributor address; City; State; Zip Code				
		Farmersville, TX 75442				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Owner		Foy Inc			
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	04/28/2024	Foy, James				\$25.00
		Contributor address; City; State; Zip Code		·		
		Farmersville, TX 75442				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Owner		Foy Inc			
-			1			

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	The Instru	ction Guide explains how to co	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 48/188 Rpt: 51/260	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor out	it-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/28/2024	Foy, James					\$25.00
		6 Contributor address; City; State; Zip			1		
		Formaravilla TV 75442					
Q	Principal occu	Farmersville, TX 75442 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
0	Owner			Foy Inc	5)		
				-	I	Amount of Contribution (¢)	
	Date 02/28/2024		it-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	0212012024						<b>⊅</b> ∠3.00
		Contributor address; City; State; Zip	p Code				
		Farmersville, TX 75442					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 5)		
	Owner			Foy Inc	,		
	Date	Full name of contributor	It-of-state PAC (ID#:	-		Amount of Contribution (\$)	
	03/28/2024	Foy, James		/		Amount of Contribution (+)	\$25.00
	00,22.2						·
			50000				
		Farmersville, TX 75442					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Foy Inc			
	Date	Full name of contributor	it-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/04/2024	Foy, James					\$2,065.20
		Contributor address; City; State; Zip					
	- · · ·	Farmersville, TX 75442	r		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner	<del></del>		Foy Inc			
	Date		it-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/08/2024	Frey, Dale					\$205.67
		Contributor address; City; State; Zip	p Code				
		The Colony, TX 75056					
	Drincinal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	<u> </u>		
	Web Develo			Mobomo L.L.C.	5)		
			I				

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	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 49/188 Rpt: 52/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	03/19/2024	Frisco Democratic Club				\$51.83
	ļ	6 Contributor address; City; State; Zip Code		1		
	ł	1				
	ļ	1				
		Frisco, TX 75035				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC	(ID#:)	Γ	Amount of Contribution (\$)	
	01/11/2024	Fritze, James				\$10.00
	ł	Contributor address; City; State; Zip Code		ł		
	ł					
	ļ	1				
	ł	Fairview, TX 75069				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		inistrator/emeritus	retired			
_	Date	Full name of contributor out-of-state PAC		Τ	Amount of Contribution (\$)	
	02/16/2024	Fritze, James	(ID#,			\$10.00
	02/10/202	Contributor address; City; State; Zip Code	,			Ψ±0.03
	ł	Continuation address, Gity, State, Zip Code				
	ł	1				
	1	Fairview, TX 75069				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
		inistrator/emeritus	retired			
-	Date	Full name of contributor Out-of-state PAC	(ID#:)	Τ	Amount of Contribution (\$)	
	06/17/2024	Fritze, James	(ιυπ,			\$10.00
	00/1//2021	Contributor address; City; State; Zip Code	,			Ψ±0.02
	ļ	Continuation address, City, State, Zip Code				
	ļ	1				
	1	Fairview, TX 75069				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L s)		
		ninistrator/emeritus	retired	-,		
╞	Date	Full name of contributor Out-of-state PAC			Amount of Contribution (\$)	
	03/13/2024	Fritze, James	(ID#)			\$10.00
	00/10/202-1	Contributor address; City; State; Zip Code				Ψ10.00
	ł	Contributor address; City, State, Zip Code				
	ł	1				
	ļ	Fairview, TX 75069				
⊢	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions			
		ninistrator/emeritus	retired	5)		
⊢						

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 50/188 Rpt: 53/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	/
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/29/2024	Gant, Alan					\$10.00
		6 Contributor address; City; State			1		
		Plano, TX 75075					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired			Retired			
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	02/29/2024	Gant, Alan	<b>_</b>	/			\$10.00
	02/20/2021	Contributor address; City; State			•		+_0.00
			, zip code				
		Plano, TX 75075					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Retired			Retired	,		
╞			-		_		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#10.00</b>
	04/29/2024						\$10.00
		Contributor address; City; State	e; Zip Code				
		Plano, TX 75075					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/29/2024	Gant, Alan					\$10.00
		Contributor address; City; State	e; Zip Code				
		Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Gant, Alan	<b>.</b>				\$10.00
		Contributor address; City; State	<sup>.</sup> Zin Code		1		
			, zip code				
		Plano, TX 75075					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	1 5)		
	Retired			Retired	,		
⊢							
I I							

The Instru	ction Guide explains how	to complete this f	orm.	1 I	Total pages Schedule A1: Sch: 51/188 Rpt: 54/260	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	ty Democratic Party			1	00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
01/29/2024	Gant, Alan					\$10.00
	6 Contributor address; City; Sta			1		
2 Drizpingloppy	Plano, TX 75075			<u> </u>		
8 Principal occu Retired	Ipation / Job title (See Instructions)	)	9 Employer (See Instructions Retired	S)		
	1			1		
Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<u>م</u> ح 00
06/26/2024						\$5.00
	Contributor address; City; Sta	ate; Zip Code				
	New York, NY 10025					
Principal occu	pation / Job title (See Instructions)	<u></u>	Employer (See Instructions	<u>د)</u>		
CEO		·	Gao Admissions	5)		
				1	Amount of Contribution (\$)	
Date 04/26/2024	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$5.00
04/20/2024	Gao, Michael	ata: Zin Cada				Φ <u></u> Ο.00
	Contributor address; City; Sta	ate; Zip Code				
	New York, NY 10025					
Principal occu	I upation / Job title (See Instructions)	)	Employer (See Instructions	<u>і</u> s)		
CEO			Gao Admissions			
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
01/26/2024	Gao, Michael					\$5.00
	Contributor address; City; Sta	ate; Zip Code		1		
	New York, NY 10025					
	upation / Job title (See Instructions)	)	Employer (See Instructions	s)		
CEO			Gao Admissions			
Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
05/26/2024	Gao, Michael					\$5.00
	Contributor address; City; Sta			1		
	New York, NY 10025	-	1 /2	Ļ		
-	upation / Job title (See Instructions)	)	Employer (See Instructions	s)		
CEO			Gao Admissions			

	The Instru	ction Guide explains how to complete	this for	rm.	1	Total pages Schedule A1: Sch: 52/188 Rpt: 55/260	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:	)	7	Amount of Contribution (\$)	
	02/26/2024	Gao, Michael					\$5.00
		6 Contributor address; City; State; Zip Code					
		New York, NY 10025					
		ipation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	CEO			Gao Admissions			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	03/26/2024	Gao, Michael					\$5.00
		Contributor address; City; State; Zip Code					
		New York, NY 10025					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			Gao Admissions			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	01/20/2024	Garcia, Dennise					\$6,000.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75214					
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Justice			State of Texas			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	03/15/2024	George King Campaign					\$51.83
		Contributor address; City; State; Zip Code					
		Addison, TX 75001					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	01/17/2024	Ghagar, Amanda					\$10.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75024					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Okta			

	The Instru	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 53/188 Rpt: 56/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		ty Democratic Party			00054753	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	02/17/2024	Ghagar, Amanda				\$10.00
		6 Contributor address; City; State; Zip Code		"		
		Plano, TX 75024				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
	Attorney		Okta			
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	04/17/2024	Ghagar, Amanda				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Okta			
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
	05/17/2024	Ghagar, Amanda				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Okta			
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	03/17/2024	Ghagar, Amanda				\$10.00
		Contributor address; City; State; Zip Code		"		
		Plano, TX 75024				
	•	upation / Job title (See Instructions)	Employer (See Instructions	IS)		
	Attorney		Okta			
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	06/17/2024	Ghagar, Amanda				\$10.00
		Contributor address; City; State; Zip Code		"		
		Plano, TX 75024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	is)		
	Attorney		Okta			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 54/188 Rpt: 57/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
-		y Democratic Party			00054753	T nor of
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/04/2024	Gilbertson, Jody				\$50.00
		6 Contributor address; City; State; Zip Code		1		
		Frisco, TX 75035				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Self Employe	ed	Self Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/13/2024	Gill, Isaiah	/			\$2.00
	01/10/202-					Ψ2.00
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75071				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Dishwasher		Modern Market Eatery			
-	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Gill, Isaiah	/			\$2.00
	02/13/2024	· · · · · · · · · · · · · · · · · · ·				Φ2.00
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75071				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Dishwasher		Modern Market Eatery			
-	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/19/2024	Goldberg, Dick	/		Allount of Contribution (C)	\$10.53
	00/19/2024					Φ10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
-	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/19/2024	Goldberg, Dick	/		Allount of Contribution (4)	\$10.53
	04/13/2024	-				Φ10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
-						

The Instruction Guid	le explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 55/188 Rpt: 58/260	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
Collin County Democrati	ic Party				00054753	- ,
4 Date 5 Full nam	e of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/19/2024 Goldber						\$10.53
6 Contribut	tor address; City; State	e; Zip Code				
	TX 75024	r	2 Employer (Cap Instruct	<u> </u>		
8 Principal occupation / Job ti Retired	itle (See instructions)		9 Employer (See Instruct Retired	ions)		
Date Full nam	e of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
03/19/2024 Goldber	rg, Dick	_				\$10.53
	tor address; City; State					
Plano, T	FX 75024					
Principal occupation / Job t	itle (See Instructions)		Employer (See Instruct	ions)		
Retired			Retired			
Date Full nam	e of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
02/19/2024 Goldber						\$10.53
Contribut	tor address; City; State					
	FX 75024	T		<u> </u>		
Principal occupation / Job ti	itle (See Instructions)		Employer (See Instruct Retired	ions)		
Retired						
	e of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷40 F0
01/19/2024 Goldber	-					\$10.53
Contribut	tor address; City; State	e; Zip Code				
Plano, 1	FX 75024					
Principal occupation / Job ti	itle (See Instructions)		Employer (See Instruct	ions)		
Retired			Retired			
Date Full nam	e of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
03/18/2024 Goodwi	n, Julia	-				\$50.00
Contribut	tor address; City; State	e; Zip Code				
	FX 75074					
Principal occupation / Job ti	itle (See Instructions)		Employer (See Instruct	ions)		
Teacher			Plano ISD			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 56/188 Rpt: 59/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
04/18/2024	Goodwin, Julia		\$50.
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75074		
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Teacher		Plano ISD	
Date		)	Amount of Contribution (\$)
01/18/2024	Goodwin, Julia		\$50.
	Contributor address; City; State; Zip Code		
	Plano, TX 75074		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Teacher		Plano ISD	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/18/2024	Goodwin, Julia		\$50.
	Contributor address; City; State; Zip Code		
	Plano, TX 75074		
-	pation / Job title (See Instructions)	Employer (See Instructions	<b>;</b> )
Teacher		Plano ISD	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/18/2024	Goodwin, Julia		\$50.
	Contributor address; City; State; Zip Code		
	Plano, TX 75074	· · · · ·	
	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions	
Teacher		Plano ISD	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/18/2024	Goodwin, Julia		\$50.
	Contributor address; City; State; Zip Code		
	Plano, TX 75074		
	upation / Job title (See Instructions)	Employer (See Instructions	
Teacher		Plano ISD	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 57/188 Rpt: 60/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00054753	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/12/2024	Goodwin, Katherine				\$205.67
		6 Contributor address; City; State; Zip Code		1		
		Plano, TX 75074				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Dispute Res	olution Specialist	KATHERINE GOODWIN	N		
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/28/2024	Goodwin, Katherine				\$35.00
	Contributor address; City; State; Zip Code			1		
		Plano, TX 75074				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Dispute Res	olution Specialist	KATHERINE GOODWIN			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/28/2024	Goodwin, Katherine	/		· · · · · · · · · · · · · · · · · · ·	\$35.00
		Contributor address; City; State; Zip Code		ł		
		Plano, TX 75074				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	1 S)		
		olution Specialist	KATHERINE GOODWIN			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	06/28/2024	Goodwin, Katherine	/		Allount of Contribution (4)	\$35.00
	0012012027			ł		ψ00.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	•	colution Specialist	KATHERINE GOODWIN			
╞				T	Amount of Contribution (\$)	
	Date 02/28/2024		)			\$35.00
	0212012024	Goodwin, Katherine				Φ30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
L	Dringingloggy		Employer (Cap Instructions			
		Ipation / Job title (See Instructions)	Employer (See Instructions			
	Dispute Res	olution Specialist	KATHERINE GOODWIN	N		

The Instruction Guide explains how to complete this form.       1 Total pages Sc         Sch: 58/188 F         2 FILER NAME       3 Filer ID (Ethic	
2 FILER NAME 3 Filer ID (Ethic	
	cs Commission Filers)
Collin County Democratic Party 00054753	
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Con	tribution (\$)
03/28/2024 Goodwin, Katherine	\$35.00
6 Contributor address; City; State; Zip Code	
Plano, TX 75074  Principal accuration / Job title (See Instructions)  Principal accuration / Job title (See Instructions)	
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)         Dispute Resolution Specialist       KATHERINE GOODWIN	
	· · · · · · · · · · · · · · · · · · ·
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Con       04/28/2024     Goodwin, Katherine	
	\$35.00
Contributor address; City; State; Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Dispute Resolution Specialist KATHERINE GOODWIN	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Con	tribution (\$)
01/02/2024 Goodwin, Vikki	\$205.67
Contributor address; City; State; Zip Code	
Austin, TX 78739	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Goodwin & Goodwin Real Estate	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Con	
01/13/2024 Gore, Marta	\$205.67
Contributor address; City; State; Zip Code	
Mckinney, TX 75072	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Teacher McKinney ISD	
	tribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Con	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contributor       01/13/2024     Gosewehr, Rocio	\$359.51
	\$359.51
01/13/2024 Gosewehr, Rocio	\$359.51
01/13/2024 Gosewehr, Rocio Contributor address; City; State; Zip Code	\$329.2T
01/13/2024 Gosewehr, Rocio Contributor address; City; State; Zip Code Plano, TX 75025	
01/13/2024       Gosewehr, Rocio         Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
01/13/2024 Gosewehr, Rocio Contributor address; City; State; Zip Code Plano, TX 75025	

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 59/188 Rpt: 62/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/19/2024	Graham, Uvolin					\$205.67
	ŕ	6 Contributor address; City; State					
		Allen, TX 75013					
8	Principal occu Retired	pation / Job title (See Instructions)		9 Employer (See Instructions Retired	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/05/2024	Graham, Uvolin					\$205.67
		Contributor address; City; State					
	ł		5, Zip 0000				
	ļ						
	ļ	Allen, TX 75013					
<u> </u>	Dringing opp		r	Employer (Coo Instructions			
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/27/2024	Granados, Andrea R					\$205.67
	ł	Contributor address; City; State	e; Zip Code				
	ļ						
	ļ						
	ļ	Dallas, TX 75229					
	Principal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	<u> </u> 5)		
	Community (			Battleground Texas	,		
	-	Full name of contributor			<u> </u>	Amount of Contribution (ft)	
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢C0.00
	03/07/2024						\$60.00
	ļ	Contributor address; City; State	e; Zip Code				
	ļ						
	ļ						
		Dallas, TX 75229					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Community (	Jrganizer		Battleground Texas			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/29/2024	Grandinetti, Stephen	-				\$20.00
	1	Contributor address; City; State	e: 7in Code				
	ł		5, <u>Lip</u> 0000				
	ł						
	ł	Plano, TX 75075					
L	Dringinglage			Employer (Cas Instructions			
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	R & D			BRAKEBUSH			

	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 60/188 Rpt: 63/260	
2	FILER NAME			3	Filer ID (Ethics Commission F	-ilers)
		ty Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/20/2024	Greenberg, Charles				\$5.00
	I	6 Contributor address; City; State; Zip Code		1		
		South San Francisco, CA 94080				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Data Scientis	st	Apple			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/20/2024	Greenberg, Charles				\$5.00
	I	Contributor address; City; State; Zip Code		·		
	I	South San Francisco, CA 94080				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Data Scientis	st	Apple			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	03/20/2024	Greenberg, Charles				\$5.00
	I	Contributor address; City; State; Zip Code		·		
		South San Francisco, CA 94080				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Data Scientis	st	Apple			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	04/20/2024	Greenberg, Charles				\$5.00
	I	Contributor address; City; State; Zip Code		·		
		South San Francisco, CA 94080				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Data Scientis	st	Apple			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	06/20/2024	Greenberg, Charles				\$5.00
	I	Contributor address; City; State; Zip Code		·		
		South San Francisco, CA 94080				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<b></b> s)		
	Data Scientis		Apple			
		J				

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	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 61/188 Rpt: 64/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Collin Count	y Democratic Party		00054753
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	05/20/2024	Greenberg, Charles		\$5.00
		6 Contributor address; City; State; Zip Code		1
Ļ		South San Francisco, CA 94080		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
	Data Scienti		Apple	
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	01/04/2024			\$205.67
	Contributor address; City; State; Zip Code			
		Richardson, TX 75080		
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)
	Insurance A		Brooke Hull Insurance A	
╞	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	03/28/2024	Griffin, Patricia	:/	\$31.18
		Contributor address; City; State; Zip Code		
		Richardson, TX 75080		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Insurance A	gent	Brooke Hull Insurance A	Agency
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	06/28/2024	Griffin, Patricia		\$31.18
		Contributor address; City; State; Zip Code		1
		Disbardoon TV 75000		
┝	Drincinal occu	Richardson, TX 75080 Ipation / Job title (See Instructions)	Employer (See Instructions	
	Insurance A	,	Brooke Hull Insurance A	,
╞				
	Date 04/28/2024	Full name of contributor Out-of-state PAC (ID#: Griffin, Patricia	)	Amount of Contribution (\$) \$31.18
	0412012024			
		Contributor address; City; State; Zip Code		
		Richardson, TX 75080		
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
	Insurance A	gent	Brooke Hull Insurance A	Agency
⊢				

_							
	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 62/188 Rpt: 65/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		ty Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/28/2024	Griffin, Patricia					\$31.18
		6 Contributor address; City; State	e; Zip Code		1		
		Richardson, TX 75080					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	1 5)		
	Insurance A			Brooke Hull Insurance A		ency	
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/23/2024	Guerra, Kathy	-				\$205.67
		Contributor address; City; State			1		
		-	, ,				
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Teacher			Retired			
⊢	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/07/2024	Guha, Mita	1				\$359.51
			e; Zip Code		ł		
			, <u>-</u> ,				
		McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	self Employe	ed		Amazon			
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/20/2024	Guthrie, Doree	J .				\$10.53
					ł		
			, <u></u> p 0001				
		Mckinney, TX 75070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/20/2024	Guthrie, Doree	-				\$10.53
		Contributor address; City; State	e: Zip Code		1		
		, , , , , , , , , , , , , , , , , , ,	, <u> </u>				
		Mckinney, TX 75070					
	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
$\vdash$			I				

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 63/188 Rpt: 66/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/20/2024	Guthrie, Doree					\$10.53
		6 Contributor address; City; State; Zip Code			1		
		Mckinney, TX 75070					
8	Princinal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	<u>ا</u>		
	Retired			Retired	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/27/2024	Hale, Carolyn					\$205.67
		Contributor address; City; State			1		
		Plano, TX 75025					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Reservoir Te	ech		REI Energy			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/29/2024	Hall, Linda	_				\$5.00
	Contributor address; City; State; Zip Code			1			
		Plano, TX 75074					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not employe	d		Not employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/09/2024	Hall-Gumble, Markita					\$25.00
		Contributor address; City; State			]		
		Mckinney, TX 75072					
_	Dringing ogg	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not employe			Not employed	5)		
				Not employed	_		
	Date 03/09/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢25.00
	03/09/2024	Hall-Gumble, Markita					\$25.00
		Contributor address; City; State	e; Zip Code				
		Mckinney, TX 75072					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Not employe			Not employed	-,		
$\vdash$							

Т	he Instru <sup>،</sup>	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 64/188 Rpt: 67/260	
<b>2</b> F	ILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	
<b>4</b> D	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
0	01/09/2024	Hall-Gumble, Markita				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
		Mckinney, TX 75072				
<b>8</b> P	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	L s)		
	Not employe		Not employed	<i>.,</i>		
D	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
0	02/09/2024	Hall-Gumble, Markita				\$25.00
		Contributor address; City; State; Zip Code				
<u>ا</u>		Mckinney, TX 75072		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
IN	Not employe	d	Not employed			
D	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
0	04/09/2024	Hall-Gumble, Markita				\$25.00
		Mckinney, TX 75072				
	•	upation / Job title (See Instructions)	Employer (See Instructions	3)		
N	Not employe	d	Not employed			
D	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
0	05/09/2024	Hall-Gumble, Markita				\$25.00
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75072				
	Principal occu Not employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not employed	3)		
D	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
0	04/15/2024	Hamilton, Anna				\$25.00
		Contributor address; City; State; Zip Code Plano, TX 75075				
			Employor (Soc Instructions	<u> </u>		
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
A	Advisor		UT Dallas			

	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 65/188 Rpt: 68/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor Out-of-state PAC (I	ID#:	)	7	Amount of Contribution (\$)	
	03/15/2024	Hamilton, Anna					\$25.00
	1	6 Contributor address; City; State; Zip Code			1		
	l						
	I						
		Plano, TX 75075					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Advisor			UT Dallas			
	Date	Full name of contributor 🔲 out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	02/15/2024	Hamilton, Anna					\$25.00
	I	Contributor address; City; State; Zip Code					
	I						
	l						
		Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Advisor			UT Dallas			
⊨	Date	Full name of contributor out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	01/15/2024	Hamilton, Anna					\$25.00
	l	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Advisor			UT Dallas			
⊨	Date	Full name of contributor out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	05/15/2024	Hamilton, Anna					\$25.00
	I	Contributor address; City; State; Zip Code					
	l						
	l						
	I	Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Advisor			UT Dallas			
	Date	Full name of contributor out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	06/15/2024	Hamilton, Anna					\$25.00
	1	Contributor address; City; State; Zip Code					
	I						
	I						
	l	Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Advisor			UT Dallas			

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т	The Instrue	ction Guide explains how	v to complete this f	form.	1	Total pages Schedule A1: Sch: 66/188 Rpt: 69/260	
<b>2</b> F	ILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	
<b>4</b> D	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
0	06/21/2024	Hamilton, Larry					\$50.00
		6 Contributor address; City; St			"		
		Richardson, TX 75080					
<b>8</b> P	rincipal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	is)		
re	etired			none			
D	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
0	5/21/2024	Hamilton, Larry	—				\$50.00
			tate; Zip Code		·		
	1		·····, .				
	1						
		Richardson, TX 75080					
P	rincipal occu	pation / Job title (See Instructions	 S)	Employer (See Instructions	us)		
	etired		,	none			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
	)4/21/2024	Hamilton, Larry	UUI-01-SIAIE FAC (10π	/			\$50.00
	412112027		tata: Zin Cada				ψυυ.υυ
		Contributor address; City; St	tate; Zip Code				
		Richardson, TX 75080					
	Principal occu	pation / Job title (See Instructions	<u></u>	Employer (See Instructions	<u> </u>		
	retired		))	none	5)		
					<del>—</del>		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	÷=0.00
0	)3/21/2024	Hamilton, Larry					\$50.00
	1	Contributor address; City; St					
	1						
	1	Disbordson TV 75090					
<u>⊢</u> _		Richardson, TX 75080	- \				
		pation / Job title (See Instructions	<i>i</i> )	Employer (See Instructions	S)		
	etired			none	<del>.                                    </del>		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
0	)2/21/2024	Hamilton, Larry					\$50.00
	1	Contributor address; City; St			Ί		
	1						
	1						
		Richardson, TX 75080					
Р	rincipal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
re	etired			none			

The Instruction Guide explains how to complete this form.       1 Total pages So Sch: 67/188         2 FILER NAME       3 Filer ID (Ethi O0054753)         4 Date       5 Full name of contributor out-of-state PAC (ID#:)       7 Amount of Contributor Contr	chedule A1:
Collin County Democratic Party       00054753         4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Cor	Rpt: 70/260
Collin County Democratic Party       00054753         4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Control	cs Commission Filers)
01/21/2024 Hamilton Larry	tribution (\$)
	\$50.00
6 Contributor address; City; State; Zip Code	
Richardson, TX 75080	
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         retired       none	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Cor	
02/20/2024 Hanson, William	\$33.25
Contributor address; City; State; Zip Code	
Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired Retired	
	atribution (¢)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Cor 06/03/2024 Harrington, Lawrence R	\$10.00
Contributor address; City; State; Zip Code	\$10.00
Continuator address, City, State, Zip Code	
Plano, TX 75093	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not employed Not employed	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contributor	tribution (\$)
04/03/2024 Harrington, Lawrence R	\$10.00
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Plano, TX 75093	
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions)         Not employed    Employer (See Instructions) Not employed	
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions)         Not employed         Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of Cor	.,
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions) Not employed         Date         Full name of contributor         05/03/2024    Full name of contributor R Amount of Corr	ntribution (\$) \$10.00
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions)         Not employed         Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of Cor	.,
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions)         Not employed         Date         Full name of contributor         05/03/2024    Harrington, Lawrence R	.,
Contributor address; City; State; Zip Code         Plano, TX 75093         Principal occupation / Job title (See Instructions) Not employed       Employer (See Instructions) Not employed         Date       Full name of contributor out-of-state PAC (ID#:) Harrington, Lawrence R         05/03/2024       Harrington, Lawrence R         Contributor address; City; State; Zip Code	.,
Contributor address; City; State; Zip Code       Plano, TX 75093         Principal occupation / Job title (See Instructions) Not employed       Employer (See Instructions) Not employed         Date       Full name of contributor out-of-state PAC (ID#:) Harrington, Lawrence R         Contributor address; City; State; Zip Code       Amount of Cor         Plano, TX 75093       Plano, TX 75093	.,
Contributor address; City; State; Zip Code       Plano, TX 75093         Principal occupation / Job title (See Instructions) Not employed       Employer (See Instructions) Not employed         Date       Full name of contributor       out-of-state PAC (ID#:) Harrington, Lawrence R         05/03/2024       Harrington, Lawrence R       Amount of Cor         Plano, TX 75093       Plano, TX 75093       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	.,
Contributor address; City; State; Zip Code       Plano, TX 75093         Principal occupation / Job title (See Instructions) Not employed       Employer (See Instructions) Not employed         Date       Full name of contributor       out-of-state PAC (ID#:)         05/03/2024       Harrington, Lawrence R       Amount of Cor         Of Plano, TX 75093       Plano, TX 75093       Plano, TX 75093	.,

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1:	
•	FILER NAME			-	Sch: 68/188 Rpt: 71/260	(Filere)
2		y Democratic Party		3	Filer ID (Ethics Commission 00054753	Filers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
4	02/03/2024	Harrington, Lawrence R	)	ľ		\$10.00
	02/00/2024	6 Contributor address; City; State; Zip Code				<b>\$10.00</b>
		Contributor address, City, State, Zip Code				
		Plano, TX 75093				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/09/2024	Harrington, Lawrence R				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Not employe		Not employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#10.00</b>
	03/03/2024	Harrington, Lawrence R				\$10.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not employe		Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/18/2024	Harrison, Vielka				\$103.45
		Contributor address; City; State; Zip Code				
		McKinney, TX 75072				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/04/2024	Hart, Paul				\$40.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Not Employe		Not Employed	-)		

The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1: Sch: 69/188 Rpt: 72/260	
2	2 FILER NAME				<b>3</b> Filer ID (Ethics Commission Filers)		
		ounty Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-	Full name of contributor     out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
	03/13/2024	Hart, Paul					\$60.00
		6 Contributor address; City; State; Zip Code			1		
		Plano, TX 75075					
8	Principal occu	rincipal occupation / Job title (See Instructions) 9 Employer (See Inst		9 Employer (See Instructions	5)		
	Not Employe	Not Employed		Not Employed			
	Date	Full name of contributor out-of-	-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/17/2024	6/17/2024 Hart, Paul					\$40.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75075					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed and a second s		Not Employed			
	Date Full name of contributor out-of-state PAC (ID#:		)	Γ	Amount of Contribution (\$)		
	06/01/2024 Hauser, Sarah						\$10.00
		Contributor address; City; State; Zip Code			1		
	Allen, TX 75002						
	Principal occupation / Job title (See Instructions)			Employer (See Instructions	5)		
Not Employed		)d		Not Employed			
	Date         Full name of contributor         out-of-state PAC (ID#:)		)	Γ	Amount of Contribution (\$)		
	04/01/2024						\$10.00
	Contributor address; City; State; Zip Code				1		
	Allen, TX 75002						
				Employer (See Instructions	<u> </u>		
	Not Employed			Not Employed			
╞	Date	Full name of contributor	-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/01/2024	Hauser, Sarah				\$10.00	
		Contributor address; City; State; Zip Co	ode		$\mathbf{I}$		
		Allen, TX 75002					
	Principal occupation / Job title (See Instructions)			Employer (See Instructions	5)		
	Not Employed			Not Employed			
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	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 70/188 Rpt: 73/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state PAC (I	D#:	)	7	Amount of Contribution (\$)	
	01/01/2024	Hauser, Sarah					\$10.00
	I	6 Contributor address; City; State; Zip Code					
		Allen, TX 75002					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
_	Not Employe	؛d		Not Employed			
	Date		D#:	)		Amount of Contribution (\$)	
	03/01/2024	Hauser, Sarah					\$10.00
	I	Contributor address; City; State; Zip Code					
		Allen, TX 75002	<u> </u>				
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
_	Not Employe	؛d		Not Employed			
	Date	Full name of contributor out-of-state PAC (I	D#:	)		Amount of Contribution (\$)	
	02/01/2024	Hauser, Sarah					\$10.00
	I	Contributor address; City; State; Zip Code					
		Allen TV 75000					
	Driveland ener	Allen, TX 75002	<u> </u>	Sector (Cas Instructions	Ĺ		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
_					-		
	Date		D#:	)		Amount of Contribution (\$)	÷170.00
	01/24/2024	Hava for Texas HD106					\$179.86
		Contributor address; City; State; Zip Code					
		Frisco, TX 75033					
	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u>		
	Г шора осса				<i>י</i> י		
-		Full name of contributor Out-of-state PAC (I			<u> </u>	Amount of Contribution (\$)	
	Date 06/11/2024	Full name of contributor Out-of-state PAC (I Havens, Theresa	D#:	)		Amount of Contribution (\$)	\$20.85
	00/11/2024						Φ20.05
		Contributor address; City; State; Zip Code					
		Allen, TX 75013					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Instructional			AT&T	,		
			<u> </u>				

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 71/188 Rpt: 74/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
-		y Democratic Party			00054753	r lier3)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/11/2024	Havens, Theresa				\$20.85
		6 Contributor address; City; State; Zip Code		1		
		Allen, TX 75013				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Instructional	Designer	AT&T			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/11/2024	Havens, Theresa				\$20.85
	<b>0-</b> , <b>--</b> ,			•		<b>+-</b>
		Allen, TX 75013				
	Dringing occu	pation / Job title (See Instructions)	Employor (Soo Instructions	<u> </u>		
			Employer (See Instructions AT&T	5)		
	Instructional	-	ΑΙαΙ			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/11/2024	Havens, Theresa				\$20.85
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75013				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Instructional	Designer	AT&T			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	03/11/2024	Havens, Theresa			• -	\$20.85
		Contributor address; City; State; Zip Code		ł		.
		Continuation address, City, State, Zip Code				
		Allen, TX 75013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	Instructional		AT&T	,		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	±00.05
	04/11/2024	Havens, Theresa		]		\$20.85
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Instructional	Designer	AT&T			
			1			

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 72/188 Rpt: 75/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/27/2024	Heasley, Rhonda				\$64.37
		6 Contributor address; City; State; Zip Code		"		
		Frisco, TX 75033				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Homemaker		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/27/2024	Heasley, Rhonda				\$64.37
		Contributor address; City; State; Zip Code				
		Frisco, TX 75033				
	-	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Homemaker		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Heasley, Rhonda				\$64.37
		Contributor address; City; State; Zip Code				
		Frisco, TX 75033				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Homemaker		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2024	Heasley, Rhonda				\$64.37
		Contributor address; City; State; Zip Code		"		
		Frisco, TX 75033				
	-	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Homemaker		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/06/2024	Henkle, Charles				\$20.00
		Contributor address; City; State; Zip Code		"		
		Fairview, TX 75069				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 73/188 Rpt: 76/260	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	ty Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/06/2024	Henkle, Charles			\$20.00
	6 Contributor address; City; State; Zip Code			
	Fairview, TX 75069	<u> </u>		
	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Not Employe	2d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/06/2024	Henkle, Charles			\$20.00
	Contributor address; City; State; Zip Code			
	Fairview, TX 75069			
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/06/2024	Henkle, Charles			\$20.00
	Contributor address; City; State; Zip Code			
	Fairview, TX 75069			
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Not Employe	2d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/06/2024	Henkle, Charles			\$20.00
	Contributor address; City; State; Zip Code			
	Fairview, TX 75069	l		
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Not Employe	)d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/06/2024	Henkle, Charles			\$20.00
	Contributor address; City; State; Zip Code			
	Fairview, TX 75069			
-	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Not Employe	ed	Not Employed		

	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 74/188 Rpt: 77/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00054753	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/29/2024	Hewson, Melissa				\$60.00
		6 Contributor address; City; State; Zip Code		"		
	ļ					
		Allen, TX 75013				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	) :)		Amount of Contribution (\$)	
	03/30/2024	Hewson, Melissa				\$60.00
		Contributor address; City; State; Zip Code		·		
	ļ					
	ļ	Allen, TX 75013				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired	•		
⊢	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Т	Amount of Contribution (\$)	
	01/08/2024	Hewson, Melissa	/			\$359.51
	01/00/2027					Ψ000.01
		Contributor address; City; State; Zip Code				
	ļ					
		Allen, TX 75013				
$\vdash$	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	د) 		
	Retired		Retired	3)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 200.00
	04/17/2024	Hewson, Melissa				\$200.00
		Contributor address; City; State; Zip Code				
	ļ					
		Allen, TX 75013				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Retired	,	Retired	-,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Т	Amount of Contribution (\$)	
	04/30/2024	Hewson, Melissa	/			\$60.00
	04/00/2027			·		ψ00.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Allen, TX 75013				
$\vdash$	Dringingl oog		Employer (See Instruction)	<u> </u>		
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired		Retired			

Th	ne Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 75/188 Rpt: 78/260
2 FIL	ER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party		00054753
4 Dat	te	5 Full name of contributor Out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
06/	/30/2024	Hewson, Melissa		\$60.00
		6 Contributor address; City; State; Zip Code		1
		Allen, TX 75013		
		pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Re	etired		Retired	
Dat		Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
05/	/30/2024	Hewson, Melissa		\$60.00
		Contributor address; City; State; Zip Code		1
		Allen, TX 75013		
Prir	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Re	etired		Retired	
Dat	te	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
01/	/30/2024	Hewson, Melissa		\$60.00
		Contributor address; City; State; Zip Code		1
		Allen, TX 75013	- i	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
Ке	etired		Retired	
Dat	te	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)
06/	/19/2024	Higbe, Mary		\$10.00
		Contributor address; City; State; Zip Code		1
		Plano, TX 75075		
Prir	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	under/CE		In Your Pocket	-,
Dat	+a	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	/19/2024	Higbe, Mary	·/	\$10.00
	110/202	Contributor address; City; State; Zip Code		
		Contributor address, City, State, Zip Code		
		Plano, TX 75075		
Prir	ncipal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	S)
	under/CE		In Your Pocket	
1				

The Instru	iction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 76/188 Rpt: 79/260	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	ty Democratic Party				00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
02/19/2024	<b>J J J J J J J J J J</b>	-				\$10.00
	6 Contributor address; City; State	e; Zip Code		·		
	Plano, TX 75075					
8 Principal occ	upation / Job title (See Instructions)	ć	9 Employer (See Instructions	s)		
Founder/CE	:O		In Your Pocket			
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
04/19/2024	Higbe, Mary	_				\$10.00
	Contributor address; City; State	e <sup>.</sup> 7in Code		·		-
		, 2ip 0000				
	Plano, TX 75075					
Principal occ	upation / Job title (See Instructions)		Employer (See Instructions	s)		
Founder/CE			In Your Pocket			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
03/19/2024	Higbe, Mary		/			\$10.00
00,10,202		e: Zin Code		·		Ψ±0.00
		<i>;</i> , Σιρ σουσ				
	Plano, TX 75075					
Principal occ	upation / Job title (See Instructions)	r	Employer (See Instructions	<u> </u>		
Founder/CE			In Your Pocket	,		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
01/19/2024	Higbe, Mary		/		Allount of Contribution (C)	\$10.00
01/10/202 .		e: Zin Code		·		Ψ±0.00
	Contributor address; City; State	3; ZIP Code				
	Plano, TX 75075					
Principal occ	upation / Job title (See Instructions)		Employer (See Instructions	L S)		
Founder/CE			In Your Pocket	-,		
	Full name of contributor			Т	Amount of Contribution (\$)	
Date 06/21/2024	Hill, Jacqueline	out-of-state PAC (ID#:	)			\$10.00
0012112027	·	⇒ ∧ 4-				Φ10.00
	Contributor address; City; State	3; Zip Code				
	Plano, TX 75075					
Drincinal occ		F	Employor (See Instructions	<u> </u>		
Retired	upation / Job title (See Instructions)		Employer (See Instructions Retired	S)		
Relieu		L	Relieu			

The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 77/188 Rpt: 80/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state P		7 Amount of Contribution (\$)
04/08/2024	Hill, Shad		\$10.00
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75093		
•	upation / Job title (See Instructions)	9 Employer (See Instructions	
Application /	Administrator	North Texas Tollway Au	uthority
Date		PAC (ID#:)	Amount of Contribution (\$)
03/08/2024	Hill, Shad		\$10.00
	Contributor address; City; State; Zip Code		
	Diana TV 75002		
Dringing oog	Plano, TX 75093	Employer (See Instruction	
	upation / Job title (See Instructions) Administrator	Employer (See Instruction: North Texas Tollway Au	
			-
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
06/08/2024	Hill, Shad		\$10.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	ls)
Application /	Administrator	North Texas Tollway Au	uthority
Date	Full name of contributor out-of-state P	 PAC (ID#:)	Amount of Contribution (\$)
01/08/2024	Hill, Shad		\$10.00
	Contributor address; City; State; Zip Code		
Di dastasa	Plano, TX 75093		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	,
	Administrator	North Texas Tollway Au	-
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
02/08/2024	Hill, Shad		\$10.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
Principal occl	upation / Job title (See Instructions)	Employer (See Instruction	
-	Administrator	North Texas Tollway Au	

Image: Section 2 difference 2 differenc	The Instruct	ion Guide explains how to complete this fo	orm.		
Collin Courty Democratic Party       00054753         4       Date 05/08/2024       Full name of contributor Hill, Shad       uut-of-state PAC (Dtr				Sch: 78/188 Rpt: 81/260	
Collin Courty Democratic Party       00054753         4       Date 05/08/2024       Full name of contributor Hill, Shad       uut-of-state PAC (Dtr	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Fi	lers)
05/08/2024       Hill, Shad       \$10.00         6       Contributor address; City; State; Zip Code       \$10.00         8       Principal occupation 1 Job title (See Instructions)       9       Employer (See Instructions)         Application Administrator       Image: Second		Democratic Party			
6       Contributor address; City; State; Zip Code         Plano, TX 75093       9       Employer (See Instructions) North Texas Tollway Authority         Date       Full name of contributor       out-of-state PAC (DB////////////////////////////////////	4 Date 5	Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
6       Contributor address; City; State; Zip Code       Plano, TX 75093         8       Principal occupation / Job title (See instructions) Application Administrator       9       Employer (See Instructions) North Texas Tollway Authority         Date       Full name of contributor       out-of-state PAC (ID#:	05/08/2024	Hill, Shad			\$10.00
8       Principal occupation / Job title (See Instructions) Application Administrator       9       Employer (See Instructions) North Texas Tollway Authority         Date 01/31/2024       Full name of contributor Hinton, Kimberley       out-of-state PAC (ID#:	6				
8       Principal occupation / Job title (See Instructions) Application Administrator       9       Employer (See Instructions) North Texas Tollway Authority         Date 01/31/2024       Full name of contributor Hinton, Kimberley       out-of-state PAC (ID#:					
8       Principal occupation / Job title (See Instructions) Application Administrator       9       Employer (See Instructions) North Texas Tollway Authority         Date 01/31/2024       Full name of contributor or out-of-state PAC (ID#: Hinton, Kimberley       Amount of Contribution (\$) S10.00         Date 01/31/2024       Full name of contributor or out-of-state PAC (ID#: Hinton, Kimberley       Amount of Contribution (\$) S10.00         Del Valle, TX 78617       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S12.9.20         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S12.9.20         Date 01/11/2024       Full name of contributor out-of-state PAC (ID#: Addison, TX 75001       Amount of Contribution (\$) S12.9.20         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S12.9.20         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S10.50         Principal occupation / Job title (See Instructions) Retired       Full name of contributor out-of-state PAC (ID#: Difference       Amount of Contribution (\$) S10.50         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S10.50         Date 05/19/2024       Full name of contributor Addison, TX 75082					
Application Administrator         North Texas Tollway Authority           Date         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$10.00           01/31/2024         Hinton, Kimberley         S10.00         \$10.00         \$10.00           Ol/31/2024         Hinton, Kimberley         S10.00         \$10.00         \$10.00           Contributor address; City; State; Zip Code         Employer (See Instructions)         Amount of Contribution (\$)         \$10.00           Not Employed         Date         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$129.20           01/11/2024         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$129.20           01/11/2024         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$129.20           01/11/2024         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$129.20           01/11/2024         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$10.52           05/19/2024         Full name of contributor         out-of-state PAC (ID#         Amount of Contribution (\$)         \$10.52           02/19/2024		Plano, TX 75093			
Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)         01/31/2024       Hinton, Kimberley       \$10.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10.00         Del Valle, TX 78617       Employer (See Instructions) Not Employed       Amount of Contribution (\$)       \$10.00         Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)       \$129.20         Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)       \$129.20         Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)       \$129.20         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$129.20         Retired       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10.53         Os/19/2024       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)       \$10.53         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10.53         Contributor address; City; State; Zip Code       Retired       Amount of Contribution (\$)       \$10.53         Pri	8 Principal occupa	tion / Job title (See Instructions)	9 Employer (See Instructions)	)	
01/31/2024       Hinton, Kimberley       \$10.00         Contributor address; City; State; Zip Code       Del Valle, TX 78617       \$10.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#	Application Ad	ministrator	North Texas Tollway Aut	hority	
Contributor address; City; State; Zip Code       Employer (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$) (Contributor address; City; State; Zip Code         Date       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$) (State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (State; Zip Code         Date       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$) (State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (State; Zip Code         Date       Full name of contributor out-of-state PAC (ID#:) Hoffman, Emily       State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (State; Zip Code         Principal occupation / Job title (See Instructions) Retired       Full name of contributor out-of-state	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Employer (See Instructions)         Addison           Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Amount of Contribution (\$)           Not Employed         Full name of contributor         out-of-state PAC (ID#	01/31/2024	Hinton, Kimberley			\$10.00
Del Valle, TX 78617       Employer (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date 01/11/2024       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$) Hirsch, James       Amount of Contribution (\$) \$129,20         Principal occupation / Job title (See Instructions) Hirsch, James       Employer (See Instructions) Retired       Amount of Contribution (\$) \$129,20         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10,51         Date 05/19/2024       Full name of contributor or out-of-state PAC (ID# Hoffman, Emily       Amount of Contribution (\$) \$10,51         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10,51         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10,51         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10,51         Date 04/19/2024       Full name of contributor or out-of-state PAC (ID# Hoffman, Emily       Amount of Contribution (\$) \$10,51					
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$129.24         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$129.24         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:		· · · · · · · · · · · · · · · · · · ·			
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$129.24         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$129.24         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) (\$)       \$10.53         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) (\$)       \$10.53         Date       Full name of contributor       out-of-state PAC (ID#:					
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/11/2024       Hirsch, James       \$129.24         Contributor address; City; State; Zip Code       Addison, TX 75001       \$129.24         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/19/2024       Hoffman, Emily       contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.53         Retired       Richardson, TX 75082       Employer (See Instructions)       \$10.53         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.53         Retired       Retired       Retired       \$10.53         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.53         Retired       Retired       Amount of Contribution (\$)       \$10.53         Odd       Julion address; City; State PAC (ID#:		Del Valle, TX 78617			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/11/2024       Hirsch, James       \$129.26         Contributor address; City; State; Zip Code       Addison, TX 75001       \$129.26         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/19/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:	Principal occupa	tion / Job title (See Instructions)	Employer (See Instructions)	)	
01/11/2024       Hirsch, James       \$129.26         Contributor address; City; State; Zip Code       \$129.26         Addison, TX 75001       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor address; City; State; Zip Code       Amount of Contribution (\$)         05/19/2024       Fulfman, Emily       Amount of Contribution (\$)         Retired       Retired       \$10.53         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired       \$10.53         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         O4/19/2024       Hoffman, Emily       Amount of Contribution (\$)	Not Employed		Not Employed		
01/11/2024       Hirsch, James       \$129.26         Contributor address; City; State; Zip Code       \$129.26         Addison, TX 75001       Employer (See Instructions)         Retired       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (ID#:	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       Addison, TX 75001         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor out-of-state PAC (ID#:)         Date       Full name of contributor out-of-state PAC (ID#:)         Moftman, Emily       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Retired       Retired         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         Addison, TX 75082       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor	01/11/2024	—	,		5129.26
Addison, TX 75001       Employer (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:) Hoffman, Emily       Amount of Contribution (\$) \$10.53         05/19/2024       Full name of contributor       out-of-state PAC (ID#:) Richardson, TX 75082       Amount of Contribution (\$) \$10.53         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10.53         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$10.53         Date       Full name of contributor out-of-state PAC (ID#:) Hoffman, Emily       Amount of Contribution (\$) \$10.53					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         05/19/2024       Hoffman, Emily         Contributor address; City; State; Zip Code         Richardson, TX 75082         Principal occupation / Job title (See Instructions)         Retired         Date         Principal occupation / Job title (See Instructions)         Retired         Date         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)         Retired         Date       Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)         4Hoffman, Emily         S10.53					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         05/19/2024       Hoffman, Emily         Contributor address; City; State; Zip Code         Richardson, TX 75082         Principal occupation / Job title (See Instructions)         Retired         Date         Principal occupation / Job title (See Instructions)         Retired         Date         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)         Retired         Date       Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)         4Hoffman, Emily         S10.53					
Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/19/2024       Hoffman, Emily       s10.53         Contributor address; City; State; Zip Code       Fill name of contributor address; City; State; Zip Code       s10.53         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/19/2024       Hoffman, Emily       s10.53		Addison, TX 75001			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/19/2024       Hoffman, Emily       \$10.53         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       \$10.53         Richardson, TX 75082       Employer (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         04/19/2024       Hoffman, Emily       \$10.53	Principal occupa	tion / Job title (See Instructions)	Employer (See Instructions)	)	
05/19/2024       Hoffman, Emily       \$10.53         Contributor address; City; State; Zip Code       \$10.53         Richardson, TX 75082       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$10.53         04/19/2024       Hoffman, Emily	Retired		Retired		
05/19/2024       Hoffman, Emily       \$10.53         Contributor address; City; State; Zip Code       \$10.53         Richardson, TX 75082       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$10.53         04/19/2024       Hoffman, Emily	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Richardson, TX 75082         Principal occupation / Job title (See Instructions)         Retired         Employer (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)         \$10.53	05/19/2024	Hoffman, Emily			\$10.53
Richardson, TX 75082       Principal occupation / Job title (See Instructions) Retired     Employer (See Instructions) Retired       Date     Full name of contributor out-of-state PAC (ID#:) Hoffman, Emily       Amount of Contribution (\$) \$10.53					
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)       04/19/2024     Hoffman, Emily     \$10.53		· · · · · · · · · · · · · · · · · · ·			
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)       04/19/2024     Hoffman, Emily     \$10.53					
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       04/19/2024     Hoffman, Emily     \$10.53		Richardson, TX 75082			
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       04/19/2024     Hoffman, Emily     \$10.53	Principal occupa	tion / Job title (See Instructions)	Employer (See Instructions)	)	
04/19/2024 Hoffman, Emily \$10.53	Retired		Retired		
04/19/2024 Hoffman, Emily \$10.53	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	04/19/2024	—	,		\$10.53
		-			
Richardson, TX 75082		Richardson, TX 75082			
	Principal occupa	tion / Job title (See Instructions)	Employer (See Instructions)	)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Retired		Retired		
		I			

	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 79/188 Rpt: 82/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
-		y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:	)	7	Amount of Contribution (\$)	
	02/19/2024	Hoffman, Emily					\$10.53
	I	6 Contributor address; City; State; Zip Code					
	I						
	l	Richardson, TX 75082					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> יו		
0	Retired		ľ	Retired			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	03/19/2024	Hoffman, Emily					\$10.53
	I	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	06/19/2024	Hoffman, Emily	-				\$10.53
	I	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	01/19/2024	Hoffman, Emily	· _				\$10.53
	I	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	06/22/2024	Hoggard, John					\$50.00
	I	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			none			
<u> </u>			I				
1							

	The Instru	ction Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 80/188 Rpt: 83/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor o	ut-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/22/2024	Hoggard, John					\$50.00
		<b>6</b> Contributor address; City; State; Z			1		
		· · · · · · · · · · · · · · · · · · ·	F				
		Allen, TX 75002					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired			none			
	Date	Full name of contributor	ut-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	05/22/2024	Hoggard, John		)		/ unduni di Gonundulori (+)	\$50.00
	00/22/2024						φ30.00
		Contributor address; City; State; Z	lip Code				
		Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			none			
	Date	Full name of contributor	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/22/2024	Hoggard, John		/			\$50.00
			'in Codo				
		Contributor address, City, State, 2	ip Coue				
		Allon TX 75002					
	<u> </u>	Allen, TX 75002	r		Ĺ		
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			none			
	Date	Full name of contributor	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/22/2024	Hoggard, John					\$50.00
		Contributor address; City; State; Z			1		
		,,,,,,,,					
		Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired	, , , , , , , , , , , , , , , , , , ,		none	,		
	Data				<u> </u>		
	Date		ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>* - - - -</b>
	06/01/2024	Hollocker, Cindy					\$15.00
		Contributor address; City; State; Z	lip Code				
		Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Principal Tes			ATPCO			
-		-					

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 81/188 Rpt: 84/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		ty Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	t:)	7	Amount of Contribution (\$)	
	01/01/2024	Hollocker, Cindy				\$15.00
	I	6 Contributor address; City; State; Zip Code		"		
		Richardson, TX 75082				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Principal Tes	st Engineer	ATPCO			
	Date	Full name of contributor out-of-state PAC (ID#:	±:)	Τ	Amount of Contribution (\$)	
	02/01/2024	Hollocker, Cindy				\$15.00
	I	Contributor address; City; State; Zip Code				
		Richardson, TX 75082				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Principal Tes	st Engineer	ATPCO			
╞	Date	Full name of contributor out-of-state PAC (ID#:	t:)	Τ	Amount of Contribution (\$)	
	05/01/2024	Hollocker, Cindy				\$15.00
		Richardson, TX 75082				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 .S)		
	Principal Tes	st Engineer	ATPCO			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u>+</u> :)	Τ	Amount of Contribution (\$)	
	03/01/2024	Hollocker, Cindy			, undern di Gonnie in (1)	\$15.00
	00,01,11	Contributor address; City; State; Zip Code				<b>T-</b>
		Richardson, TX 75082				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	L S)		
	Principal Tes		ATPCO			
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	04/01/2024	Hollocker, Cindy			, undern di Gonnie in (1)	\$15.00
	0	Contributor address; City; State; Zip Code				Ŧ=
		Contributor address, Gity, State, Zip Code				
		Richardson, TX 75082				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Principal Tes		ATPCO	5)		

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	The Instru	ction Guide explains how to com	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 82/188 Rpt: 85/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
[		y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of	f-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/26/2024	Hollocker, Cindy					\$159.28
	1	6 Contributor address; City; State; Zip C	Code		1		
	ļ						
		Richardson, TX 75082					
8		pation / Job title (See Instructions)	ţ	9 Employer (See Instructions	5)		
	Principal Tes	st Engineer		ATPCO			
F	Date	Full name of contributor	f-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/25/2024	Hook, Misty					\$81.27
		Contributor address; City; State; Zip C					
		McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Psychologist	<u> </u>		Self			
	Date	Full name of contributor 🗌 out-of	f-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/06/2024	Hook, Misty					\$50.00
	ł	Contributor address; City; State; Zip C			1		
	ļ						
		McKinney, TX 75072					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Psychologist	<u> </u>		Self			
	Date	Full name of contributor 🗌 out-of	f-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/11/2024	Hook, Misty					\$30.00
		Contributor address; City; State; Zip C			1		
	ļ						
		McKinney, TX 75072					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Psychologist	:		Self			
F	Date	Full name of contributor out-of	f-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/13/2024	Hook, Misty					\$30.00
	ł	Contributor address; City; State; Zip C	Code		1		
	ļ						
	ļ						
		McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Psychologist			Self			

Т	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 83/188 Rpt: 86/260
<b>2</b> F	ILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party		00054753
<b>4</b> C	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
0	06/17/2024	Hook, Misty		\$50.00
		6 Contributor address; City; State; Zip Code		
		McKinney, TX 75072		
<b>8</b> F	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
F	Psychologist		Self	
C	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
0	)4/15/2024	Horany, Eileen		\$30.00
		Contributor address; City; State; Zip Code		
		Plano, TX 75075		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
F	Retired		Retired	
C	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
0	)1/18/2024	House, Devin		\$62.15
		Contributor address; City; State; Zip Code		
		Plano, TX 75025		
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions Toyota	5)
		<b></b>		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
0	)2/18/2024	House, Devin		\$62.15
		Contributor address; City; State; Zip Code		
		Plano, TX 75025		
P	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
A	Attorney		Toyota	
C	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
0	)3/18/2024	House, Devin		\$62.15
		Contributor address; City; State; Zip Code		
		Plano, TX 75025		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
A	Attorney		Toyota	

The Instr	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 84/188 Rpt: 87/260
2 FILER NAM	F		<b>3</b> Filer ID (Ethics Commission Filers)
	nty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
04/18/2024			\$62.
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75025		
8 Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions	5)
Attorney		Toyota	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
05/18/2024		/	\$62.
03/10/202-			ψυ2.
	Contributor address; City; State; Zip Code		
	Plano, TX 75025	<del></del>	
	cupation / Job title (See Instructions)	Employer (See Instructions	3)
Attorney		Toyota	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/14/2024			\$51.
	Contributor address; City; State; Zip Code		
	Mckinney, TX 75071		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
03/29/2024			\$10.
00,20.20	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	Mckinney, TX 75071		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<b> </b>
Retired		Retired	<i>)</i>
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/14/2024			\$51.
	Contributor address; City; State; Zip Code		
	Mckinney, TX 75071		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
		.1	

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	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 85/188 Rpt: 88/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID	D#:	)	7	Amount of Contribution (\$)	
	05/14/2024	Howard, Jada					\$51.83
		6 Contributor address; City; State; Zip Code					
		Mckinney, TX 75071					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
-	Retired			Retired	,		
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	04/14/2024	Howard, Jada					\$51.83
		Contributor address; City; State; Zip Code					
		- · ·					
		Mckinney, TX 75071					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	03/14/2024	Howard, Jada					\$51.83
		Contributor address; City; State; Zip Code					
		Mckinney, TX 75071					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	03/27/2024	Howard, Jada					\$37.46
		Contributor address; City; State; Zip Code					
		Mckinney, TX 75071					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
⊨	Date	Full name of contributor Out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	06/17/2024	Howard, Jada				• •	\$8.00
	Contributor address; City; State; Zip Code						
		Mckinney, TX 75071					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			

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	The Instruc	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 86/188 Rpt: 89/260	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	05/17/2024	Howard, Jada				\$8.00
		6 Contributor address; City; State; Zip Code		"		
		Mckinney, TX 75071				
8		pation / Job title (See Instructions)	9 Employer (See Instruction	ıs)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#	:)	Τ	Amount of Contribution (\$)	
	04/17/2024	Howard, Jada				\$8.00
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75071				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#	:)	Т	Amount of Contribution (\$)	
	01/26/2024	Huffman, Dana				\$359.51
		Contributor address; City; State; Zip Code				
		Richardson, TX 75080				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	າຣ)		
	Attorney		Law Office of Dana D H	Huffn	nan, PC	
F	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	01/24/2024	Hughes, Sara				\$10.53
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	າຣ)		
	Director		DAVACO			
	Date	Full name of contributor out-of-state PAC (ID#	· :)		Amount of Contribution (\$)	
	04/24/2024	Hughes, Sara				\$10.53
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Director		DAVACO			
1						

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 87/188 Rpt: 90/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/24/2024	Hughes, Sara				\$10.53
		6 Contributor address; City; State; Zip Code				
		Allen, TX 75002				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Director		DAVACO			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/24/2024	Hughes, Sara				\$10.53
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Director		DAVACO			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/24/2024	Hughes, Sara				\$10.53
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002	1			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Director		DAVACO			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/24/2024	Hughes, Sara				\$10.53
		Contributor address; City; State; Zip Code				
		Allen, TX 75002	1			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Director		DAVACO			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/24/2024	Indrea, Georgiana				\$10.53
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75070	1			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Realtor		Self Employed			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 88/188 Rpt: 91/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party		00054753
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	06/24/2024	Indrea, Georgiana		\$10.53
		6 Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Realtor		Self Employed	
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	05/24/2024	Indrea, Georgiana		\$10.53
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Realtor		Self Employed	
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	04/24/2024	Indrea, Georgiana	)	\$10.53
	04/24/2024	-		
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Realtor	······	Self Employed	-,
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
	02/24/2024		)	\$10.53
	02/24/2024	Indrea, Georgiana		
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Realtor		Self Employed	3)
╞				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/24/2024	Indrea, Georgiana		. \$10.53
		Contributor address; City; State; Zip Code		
		Makingay TV 75070		
⊢	<u> </u>	Mckinney, TX 75070		
		pation / Job title (See Instructions)	Employer (See Instructions	S)
	Realtor		Self Employed	

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 89/188 Rpt: 92/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/27/2024	Jackson, Floria	—				\$102.42
		6 Contributor address; City; Sta	ate; Zip Code				
Ļ	<u> </u>	Allen, TX 75002	-		Ļ		
8		pation / Job title (See Instructions)	)	9 Employer (See Instructions	5)		
	Retired			Retired	-		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/02/2024						\$100.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75252					
-	Principal occu	Ipation / Job title (See Instructions)	<u></u>	Employer (See Instructions	<u> </u> ו)		
	Analyst	puton, coo uto (coo		Fannie Mae	''		
╞	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	03/29/2024	Jernigan, Richard		/			\$40.00
	00,20,202	Contributor address; City; Sta					¥ 10.02
		McKinney, TX 75071					
		ipation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Video Direct	or		Cambium Learning			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/22/2024	Jernigan, Richard					\$10.00
		Contributor address; City; Sta	ate; Zip Code				
	Dringing oog	McKinney, TX 75071		Employer (Cool Instructions			
	Video Direct	ipation / Job title (See Instructions)	)	Employer (See Instructions Cambium Learning	5)		
		-	!	Campium Learning	-		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>ቀ10 00</u>
	05/22/2024	Jernigan, Richard					\$10.00
		Contributor address; City; Sta	ate; Zip Code				
		McKinney, TX 75071					
⊢	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	;)		
	Video Direct			Cambium Learning	,		
⊢				-			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 90/188 Rpt: 93/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date     5 Full name of contributor     out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
04/22/2024 Jernigan, Richard	\$10.00
6 Contributor address; City; State; Zip Code	
McKinney, TX 75071	
8 Principal occupation / Job title (See Instructions)     9 Employer (See Instruction)	
Video Director Cambium Learning	(5)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/22/2024 Jernigan, Richard	\$10.00
Contributor address; City; State; Zip Code	
McKinnov, TV 75071	
McKinney, TX 75071 Principal occupation / Job title (See Instructions) Employer (See Instruction	
Principal occupation / Job title (See Instructions)Employer (See InstructionVideo DirectorCambium Learning	(5)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/22/2024 Jernigan, Richard	\$10.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions)Employer (See InstructionVideo DirectorCambium Learning	5)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/22/2024 Jernigan, Richard	\$10.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	 IS)
Video Director Cambium Learning	
Data Eull name of contributor D out of state PAC (ID#: )	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/20/2024 Johnson, Darryl	Amount of Contribution (\$) 
01/20/2024 Johnson, Darryl	
01/20/2024 Johnson, Darryl Contributor address; City; State; Zip Code	
01/20/2024 Johnson, Darryl Contributor address; City; State; Zip Code Dallas, TX 75254	\$398.00
01/20/2024       Johnson, Darryl         Contributor address; City; State; Zip Code         Dallas, TX 75254         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	\$398.00
01/20/2024 Johnson, Darryl Contributor address; City; State; Zip Code Dallas, TX 75254	\$398.00

1	The Instru	ction Guide explains how to complete t	this for	rm.	1	Total pages Schedule A1: Sch: 91/188 Rpt: 94/260	
<b>2</b> F	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	
<b>4</b> C	Date	5 Full name of contributor out-of-state PAC	C (ID#:	)	7	Amount of Contribution (\$)	
C	01/18/2024	Johnson, Sam					\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Plano, TX 75093					
		pation / Job title (See Instructions)	9	Employer (See Instructions		511.0	
F	Attorney			Johnson Friedman Law	Gr	oup, PLLC	
	Date		C (ID#:	)		Amount of Contribution (\$)	
C	01/20/2024	Jones, Kaitlin					\$10.53
		Contributor address; City; State; Zip Code					
	- · · · · · · · · · · · · · · · · · · ·	Plano, TX 75023	<u> </u>		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
ر ا	Unemployed			Unemployed	-		
	Date		C (ID#:	)		Amount of Contribution (\$)	
C	02/20/2024	Jones, Kaitlin					\$10.53
		Contributor address; City; State; Zip Code					
		Plano, TX 75023					
<u> </u>		pation / Job title (See Instructions)	— r	Employer (Soo Instructions	<u> </u>		
	Unemployed	,		Employer (See Instructions Unemployed	)		
			<u> </u>		-		
	Date		C (ID#:	)		Amount of Contribution (\$)	Φ10 E2
	06/20/2024	Jones, Kaitlin					\$10.53
		Contributor address; City; State; Zip Code					
		Plano, TX 75023					
F	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	I;)		
	Unemployed			Unemployed			
	Date	Full name of contributor Out-of-state PAC		)		Amount of Contribution (\$)	
	03/20/2024	Jones, Kaitlin				• •	\$10.53
		Contributor address; City; State; Zip Code					
		Plano, TX 75023					
F	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
ι	Unemployed	I		Unemployed			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 92/188 Rpt: 95/260	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	04/20/2024	Jones, Kaitlin				\$10.53
	ł	6 Contributor address; City; State; Zip Code				
	ļ	1				
		1				
		Plano, TX 75023		Ļ		
8	Principal occu Unemployed	pation / Job title (See Instructions)	9 Employer (See Instructions Unemployed	;)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/20/2024	Jones, Kaitlin				\$10.53
		Contributor address; City; State; Zip Code				
	ļ	1				
		Plano, TX 75023				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Unemployed		Unemployed	ŋ		
⊨				_	Amount of Contribution (¢)	
	Date 02/22/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢1 000 00
	0212212024	Jones, Laura				\$1,000.00
	ļ	Contributor address; City; State; Zip Code				
		1				
		Plano, TX 75023				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	لــــــــــــــــــــــــــــــــــــ		
	Self employe	:d	Self			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/14/2024	Jones, Suzanne				\$100.00
		Contributor address; City; State; Zip Code				
		1				
	ļ	1				
L		Plano, TX 75025				
	-	pation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Professor		NA	_		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	01/12/2024	Judge Staci Williams for Chief Justice , Fifth Co	urt of Appeals			\$6,195.20
		Contributor address; City; State; Zip Code				
	ļ	1				
	ļ	Dollar TV 75220				
	Dringing occu	Dallas, TX 75229	Employer (See Instructions	<u> </u>		
	Phincipal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
⊢						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 93/188 Rpt: 96/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
01/27/2024	KDAC-Tx		\$205.67
	6 Contributor address; City; State; Zip Code		
	Fort Worth, TX 76177		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/30/2024	Kamm, Nancy		\$34.00
	Plano, TX 75093		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/06/2024	Kaner, Joseph		\$50.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)
Actuary		Globe Life	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/19/2024	Kanhai-Snorton, Karen		\$25.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75075		
	pation / Job title (See Instructions)	Employer (See Instructions	8)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/26/2024	Karmally, Sameena		\$30.00
	Contributor address; City; State; Zip Code		
	Allen, TX 75002	i	
-	pation / Job title (See Instructions)	Employer (See Instructions	3)
Attorney		None	

	The Instru	ction Guide explains how to con	nplete this for	rm.	1	Total pages Schedule A1: Sch: 94/188 Rpt: 97/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			[	00054753	
4	Date	5 Full name of contributor out-of	f-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/26/2024	Karmally, Sameena					\$30.00
		6 Contributor address; City; State; Zip C			1		
		Allen, TX 75002					
8		pation / Job title (See Instructions)	9	B Employer (See Instructions	5)		
	Attorney			None			
	Date	Full name of contributor	f-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/26/2024	Karmally, Sameena					\$30.00
		Contributor address; City; State; Zip C			1		
				ļ			
		Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			None			
	Date	Full name of contributor	of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/26/2024	Karmally, Sameena	State 17.0 (	,		, who are of 2	\$30.00
	00,20,212				ł		<b>TU</b>
			Jue				
		Allen, TX 75002					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Attorney	· · · ·		None	,		
	Date	Full name of contributor Out-of	f-state PAC (ID#:	)	—	Amount of Contribution (\$)	
	02/26/2024	Kennedy, Celeste	-Slale FAC (ID#	/			\$80.00
	021201202-1				-		Ψ00.00
		Contributor address; City; State; Zip C	Joae	ļ			
				ļ			
		McKinney, TX 75069					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u>		
	Trainer			Lowes	<i>''</i>		
					—		
	Date		of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>\$10.00</b>
	03/23/2024	Killian, Holden					\$10.00
		Contributor address; City; State; Zip C	Code				
		Allen, TX 75002			Ļ		
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	None			None			
			I				

_							
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 95/188 Rpt: 98/260	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	01/17/2024	King, Marcy					\$179.86
		6 Contributor address; City; S	state; Zip Code		1		
	Deinsinglasse	Plano, TX 75023	- )				
8	Consultant	pation / Job title (See Instruction	S)	9 Employer (See Instructions American Airlines	5)		
		1			_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<b>*•••</b>
	03/11/2024	King, Marcy					\$37.46
		Contributor address; City; S	state; Zip Code				
		Plano, TX 75023					
⊢	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	<u>ا</u> ج)		
	Consultant			American Airlines	-)		
⊨	Date	Full name of contributor		)	Т	Amount of Contribution (\$)	
	06/26/2024	King, Sheena	U OUI-OI-SIAIE PAC (ID#	)		Amount of Contribution (\$)	\$77.27
	00/20/2024		itata: Zin Cada		ł		φ11.21
		Mckinney, TX 75071					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Agency Lead	der		State Farm			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/30/2024	King, Sheena					\$34.00
		Contributor address; City; S	itate; Zip Code		1		
		Mckinney, TX 75071					
		pation / Job title (See Instruction	s)	Employer (See Instructions	S)		
	Agency Lead			State Farm	_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/03/2024	King, Sheena					\$109.27
		Contributor address; City; S	state; Zip Code				
		Mckinney, TX 75071					
⊢	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	<u>ا</u>		
	Agency Lead		~,	State Farm	.,		
⊢							

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 96/188 Rpt: 99/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date     5 Full name of contributor     out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
04/10/2024 King, Sheena	\$146.20
6 Contributor address; City; State; Zip Code	
Mckinney, TX 75071	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	IS)
Agency Leader State Farm	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/24/2024 King, Sheena	\$1,022.38
Contributor address; City; State; Zip Code	
Mckinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	is)
Agency Leader State Farm	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/25/2024 King, Sheena	\$62.15
Contributor address; City; State; Zip Code	
Mckinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	is)
Agency Leader State Farm	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/20/2024 King, Sheena	\$62.15
Contributor address; City; State; Zip Code	
Mckinney, TX 75071	
Mckinney, TX 75071 Principal occupation / Job title (See Instructions) Employer (See Instruction	 IS)
	s)
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Employer (See Instruction of State Farm       Agency Leader     State Farm       Date     Full name of contributor     out-of-state PAC (ID#:)       04/20/2024     King, Sheena	-
Principal occupation / Job title (See Instructions)     Employer (See Instruction of State Farm       Agency Leader     State Farm       Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Employer (See Instruction State Farm       Agency Leader     State Farm       Date     Full name of contributor     out-of-state PAC (ID#:)       04/20/2024     King, Sheena	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Employer (See Instruction State Farm       Agency Leader     State Farm       Date     Full name of contributor     out-of-state PAC (ID#:)       04/20/2024     King, Sheena	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Employer (See Instruction State Farm       Agency Leader     State Farm       Date     Full name of contributor     out-of-state PAC (ID#:)       04/20/2024     King, Sheena	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction State Farm         Agency Leader       State Farm         Date       Full name of contributor out-of-state PAC (ID#:)         04/20/2024       King, Sheena         Contributor address; City; State; Zip Code	Amount of Contribution (\$) 
Principal occupation / Job title (See Instructions)       Employer (See Instruction State Farm         Agency Leader       Full name of contributor       out-of-state PAC (ID#:)         04/20/2024       King, Sheena       Contributor address; City; State; Zip Code         Mckinney, TX 75071       Mckinney, TX 75071	Amount of Contribution (\$) 
Principal occupation / Job title (See Instructions)       Employer (See Instruction State Farm         Agency Leader       Full name of contributor out-of-state PAC (ID#:)         04/20/2024       King, Sheena         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code         Mckinney, TX 75071       Employer (See Instruction State Pact (ID#:)         Principal occupation / Job title (See Instructions)       Employer (See Instruction State Pact (ID#:)	Amount of Contribution (\$) 

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 97/188 Rpt: 100/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/20/2024	King, Sheena				\$62.15
		6 Contributor address; City; State; Zip Code				
		Mckinney, TX 75071		Ļ		
8			9 Employer (See Instructions	s)		
	Agency Lead	Jer	State Farm			
	Date		)	T	Amount of Contribution (\$)	
	05/30/2024	Klein, Deborah				\$34.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75023				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/22/2024	Krishna, Sanjay				\$20.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025		<u> </u>		
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Engineer		Dell	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/22/2024	Krishna, Sanjay				\$20.00
		Contributor address; City; State; Zip Code				
		Diana TV 75025				
	Dringing oog	Plano, TX 75025	Employer (Cool Instructions	<u> </u>		
	-	ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Engineer	·	Dell	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/22/2024	Krishna, Sanjay				\$20.00
		Contributor address; City; State; Zip Code				
	<u></u>	Plano, TX 75025		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Engineer		Dell			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 98/188 Rpt: 101/260
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor Out-of-state PAC (ID#	±)	7 Amount of Contribution (\$)
01/23/2024	Krishna, Sanjay		\$205.67
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 75025		
8 Principal occl	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Engineer		Dell	<i>''</i>
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)
06/22/2024	Krishna, Sanjay		\$20.00
			1
	Plano, TX 75025		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Engineer		Dell	
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
05/22/2024	Krishna, Sanjay		\$20.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Engineer		Dell	"
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
02/22/2024	Krishna, Sanjay	:/	\$20.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Engineer		Dell	
Date	Full name of contributor Out-of-state PAC (ID#	······)	Amount of Contribution (\$)
01/26/2024	Kusterbeck, John		\$10.53
	Contributor address; City; State; Zip Code		1
	Makingay TV 75070		
Drippingl oppu	Mckinney, TX 75070	Employer (See Instructions	
Principal occu N/A	upation / Job title (See Instructions)	Employer (See Instructions Unemployed	3)
		Unemployed	

The	e Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 99/188 Rpt: 102/260
2 FILE	ER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Col	llin Count	y Democratic Party		00054753
4 Date	е	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
05/2	26/2024	Kusterbeck, John		\$10.
		6 Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
		pation / Job title (See Instructions)	9 Employer (See Instructions	us)
N/A	A		Unemployed	
Date	е	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/0	01/2024	Kusterbeck, John		\$10.
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
Prin	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	IS)
N/A	A		Unemployed	
Date	е	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
03/2	26/2024	Kusterbeck, John		\$10.
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070	1	
		pation / Job title (See Instructions)	Employer (See Instructions	is)
N/A	4		Unemployed	
Date	е	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/2	26/2024	Kusterbeck, John		\$10.
		Contributor address; City; State; Zip Code		
		Mckinney, TX 75070		
		pation / Job title (See Instructions)	Employer (See Instructions	IS)
N/A	4		Unemployed	
Date		Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/3	30/2024	Lakes, Sharon		\$20.
		Contributor address; City; State; Zip Code		
		Allen TV 75012		
		Allen, TX 75013	Fundament (2011 - 11	
		pation / Job title (See Instructions)	Employer (See Instructions	IS)
Cor	minunical	ions Director	Conduent Inc.	

	The Instruc	ction Guide explains how to complete th	s form.	1	Total pages Schedule A1: Sch: 100/188 Rpt: 103/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	05/31/2024	Lakes, Sharon				\$20.00
		6 Contributor address; City; State; Zip Code				
		Allen, TX 75013				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ıs)		
	Communicat	ions Director	Conduent Inc.			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Т	Amount of Contribution (\$)	
	03/31/2024	Lakes, Sharon				\$20.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ls)		
	Communicat		Conduent Inc.	,		
⊨	Date	Full name of contributor Out-of-state PAC (I		Т	Amount of Contribution (\$)	
	04/30/2024	Lakes, Sharon	D#)			\$20.00
	04/30/2024					Ψ20.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	Communicat		Conduent Inc.	13)		
╞				<u> </u>		
	Date		D#:)		Amount of Contribution (\$)	<b>6005 07</b>
	01/12/2024	Lantz, Tarrah				\$205.67
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
	Daia air al a sau		Environ (Or a la struction			
	Homemaker	pation / Job title (See Instructions)	Employer (See Instruction	is)		
	нотпетнакег		Not Employed			
	Date	Full name of contributor 🛛 🗌 out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	05/31/2024	Laughlin, Ginny				\$34.00
		Contributor address; City; State; Zip Code		1		
		Richardson, TX 75080				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Broker		Self			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 101/188 Rpt: 104/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/04/2024 Laughlin, Virginia	\$205.67
6 Contributor address; City; State; Zip Code	
Richardson, TX 75080	
<ul> <li>8 Principal occupation / Job title (See Instructions)</li> <li>9 Employer (See Instructions)</li> </ul>	s)
Realtor Self	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/11/2024 Lavine, Steve	\$62.15
Contributor address; City; State; Zip Code	
Plano, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Retired Not Employed	
Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/11/2024 Lavine, Steve	\$62.15
Contributor address; City; State; Zip Code	
Plano, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Retired Not Employed	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/11/2024 Lavine, Steve	\$62.15
Contributor address; City; State; Zip Code	
Plano, TX 75024	<u> </u>
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Retired Not Employed	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/11/2024 Lavine, Steve	\$62.15
Contributor address; City; State; Zip Code	
Plano, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Not Employed	s)

The Instruction Guide explains how to complete this form.	1 Total pages Se Sch: 102/188	chedule A1: 8 Rpt: 105/260
2 FILER NAME		ics Commission Filers)
Collin County Democratic Party	00054753	
4 Date     5 Full name of contributor     out-of-state PAC (ID#:	) <b>7</b> Amount of Cor	
06/23/2024 Lawrence, Amy		\$15.00
6 Contributor address; City; State; Zip Code		
Murphy, TX 75094		
8 Principal occupation / Job title (See Instructions)     9 Employer (See In none	structions)	
Date         Full name of contributor         out-of-state PAC (ID#:)	) Amount of Cor	
01/23/2024 Lawrence, Amy		\$15.00
Contributor address; City; State; Zip Code		
Murphy, TX 75094		
Principal occupation / Job title (See Instructions) Employer (See In	structions)	
not employed none		
	) Amount of Cor	ntribution (\$)
Date Full name of contributor out-of-state PAC (ID#:		())
Date     Full name of contributor     Out-of-state PAC (ID#:	) Amount of Co	\$15.00
02/23/2024 Lawrence, Amy Contributor address; City; State; Zip Code Murphy, TX 75094		
02/23/2024 Lawrence, Amy Contributor address; City; State; Zip Code		
02/23/2024 Lawrence, Amy Contributor address; City; State; Zip Code Murphy, TX 75094 Principal occupation / Job title (See Instructions) Employer (See In		\$15.00
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions)         not employed         Date         Full name of contributor         03/23/2024         Lawrence, Amy	structions)	\$15.00
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions)         not employed         Date         Full name of contributor         out-of-state PAC (ID#:	structions)	\$15.00 ntribution (\$)
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)) Amount of Cor	\$15.00 ntribution (\$)
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)) Amount of Cor	\$15.00 ntribution (\$)
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)) Amount of Cor	\$15.00 ntribution (\$) \$15.00
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)  Amount of Con Structions)	\$15.00 ntribution (\$) \$15.00
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)  Amount of Con Structions)	\$15.00 ntribution (\$) \$15.00 ntribution (\$)
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)  Amount of Con Structions)	\$15.00 ntribution (\$) \$15.00 ntribution (\$)
02/23/2024       Lawrence, Amy         Contributor address; City; State; Zip Code         Murphy, TX 75094         Principal occupation / Job title (See Instructions) not employed       Employer (See In none         Date       Full name of contributor       out-of-state PAC (ID#:	structions)  Amount of Con structions)  Amount of Con Amount of Con	\$15.00 ntribution (\$) \$15.00 ntribution (\$)

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 103/188 Rpt: 106/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party	1		00054753	
4	Date 04/23/2024	5 Full name of contributor out-of-state PAC (ID#: Lawrence, Amy	)	7	Amount of Contribution (\$)	\$15.00
		6 Contributor address; City; State; Zip Code		1		
		Murphy, TX 75094				
8	Principal occu not employe		9 Employer (See Instructions none	;)		
	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	02/08/2024	Leaf, Murray	/		Amount of Continuation (4)	\$300.00
	02,00,202	Contributor address; City; State; Zip Code		•		<b>4000</b> .000
		Continuou address, City, State, Zip Code	1			
		1	1			
		Plano, TX 75075	1			
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Retired	· · · · ·	Retired			
-	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/07/2024	Leaf, Murray			Amount of Contraction (1)	\$10.53
l	01,0.,_	Contributor address; City; State; Zip Code		ł		¥=
		Plano, TX 75075				
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	;)		
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/07/2024	Leaf, Murray				\$10.53
		Contributor address; City; State; Zip Code		1		
			1			
		Plano, TX 75075				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Retired		Retired			
F	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/07/2024	Leaf, Murray			• •	\$10.53
		Contributor address; City; State; Zip Code		ł		
			1			
		1	1			
		Plano, TX 75075	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<b></b> ;)		
	Retired		Retired			
				) ;)		

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 104/188 Rpt: 107/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	04/07/2024	Leaf, Murray				\$10.53
		6 Contributor address; City; State; Zip Code		1		
		Diana TV 75075				
0	Bringinal occu	Plano, TX 75075 pation / Job title (See Instructions)	9 Employer (See Instructions			
°	Retired		Retired	5)		
_				Г	Amount of Contribution (\$	
	Date 05/07/2024	Full name of contributor out-of-state PAC (ID# Leaf, Murray	)		Amount of Contribution (\$)	\$10.53
	05/07/2024	-				\$10.55
		Contributor address; City; State; Zip Code				
		Plano, TX 75075				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	01/25/2024	Lewis, Sean				\$411.14
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75023	1	Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Director		Arcis Golf			
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	<b>#00.00</b>
	01/24/2024	Ley, Adam				\$30.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Electronics E		ASSET InterTech, Inc.	,		
	Date	Full name of contributor Out-of-state PAC (ID#	<u> </u>	Г	Amount of Contribution (\$)	
	03/24/2024	Ley, Adam	/		(1)	\$30.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Electronics E	Engineer	ASSET InterTech, Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 105/188 Rpt: 108/260	
	FILER NAME Collin Count	y Democratic Party		3	Filer ID (Ethics Commission 00054753	Filers)
	Date 04/24/2024	5 Full name of contributor out-of-state PAC (ID#: Ley, Adam		7	Amount of Contribution (\$)	\$30.00
		6 Contributor address; City; State; Zip Code				
		Allen, TX 75013		Ĺ		
	Principal occu Electronics E		9 Employer (See Instructions) ASSET InterTech, Inc.	;)		
	Date 02/24/2024	Full name of contributor out-of-state PAC (ID#: Ley, Adam Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$30.00
		Allen, TX 75013 Ipation / Job title (See Instructions)	Employer (See Instructions)	) 5)		
	Electronics E	ingineer	ASSET InterTech, Inc.			
	Date 05/24/2024	Full name of contributor       out-of-state PAC (ID#:_         Ley, Adam       Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$30.00
		Allen, TX 75013 Ipation / Job title (See Instructions)	Employer (See Instructions)	) 5)		
	Electronics E	ingineer	ASSET InterTech, Inc.			
	Date 06/24/2024	Full name of contributor out-of-state PAC (ID#: Ley, Adam Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$30.00
		Allen, TX 75013				
	Principal occu Electronics E	upation / Job title (See Instructions) Engineer	Employer (See Instructions) ASSET InterTech, Inc.	;)		
	Date 01/07/2024	Full name of contributor Dut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$179.86
		Contributor address; City; State; Zip Code				
	Principal occu	Mckinney, TX 75072 Ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		

The Instruction Guide	explains how to	complete this f	orm.	1	Total pages Schedule A1: Sch: 106/188 Rpt: 109/26	30
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Collin County Democratic I	Party				00054753	
4 Date 5 Full name o	of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
01/29/2024 Lone Star						\$5,000.00
6 Contributor	address; City; State; 2	Zip Code		1		
	on, DC 20003		<u>.</u>			
8 Principal occupation / Job title	(See Instructions)		9 Employer (See Instructions	s)		
		out-of-state PAC (ID#:_	)	Ţ	Amount of Contribution (\$)	
01/26/2024 Lorance, L	_arry					\$30.00
Contributor	address; City; State; 2			1		
Plano, TX	75025					
Principal occupation / Job title	(See Instructions)		Employer (See Instructions	s)		
Retired			Retired			
Date Full name o	of contributor	out-of-state PAC (ID#:_	)	Ī	Amount of Contribution (\$)	
03/26/2024 Lorance, L						\$30.00
Contributor	address; City; State; 2			1		
Plano, TX	75025					
Principal occupation / Job title	(See Instructions)		Employer (See Instructions	s)		
Retired			Retired			
Date Full name o	of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
02/26/2024 Lorance, L						\$30.00
Contributor	address; City; State; 2			1		
	-					
Plano, TX	75025					
Principal occupation / Job title	(See Instructions)		Employer (See Instructions	<u>.</u> s)		
Retired			Retired			
Date Full name o	of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
05/26/2024 Lorance, L	_arry					\$30.00
Contributor	address; City; State; 2	Zip Code		1		
Plano, TX	75025					
Principal occupation / Job title	(See Instructions)		Employer (See Instructions	s)		
Retired						
			Retired			
			Retired			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 107/188 Rpt: 110/260	
2	FILER NAME			3	Filer ID (Ethics Commission F	-ilers)
		y Democratic Party	!		00054753	
4	Date 04/26/2024	5 Full name of contributor out-of-state PAC (ID#: Lorance, Larry		7	Amount of Contribution (\$)	\$30.00
	I	6 Contributor address; City; State; Zip Code		•		
		Plano, TX 75025				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	06/26/2024	Lorance, Larry				\$30.00
	I	Contributor address; City; State; Zip Code				
		Plano, TX 75025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#:	t:)	Γ	Amount of Contribution (\$)	
	01/26/2024	Lorance, Nancy				\$30.00
	I	Contributor address; City; State; Zip Code		1		
		Plano, TX 75025	· · · · · · · · · · · · · · · · · · ·			
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
L		piratory Therapist/Professor	Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	05/26/2024	Lorance, Nancy	!			\$30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75025				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired Resp	piratory Therapist/Professor	Retired	_		
	Date	Full name of contributor out-of-state PAC (ID#:	t:)		Amount of Contribution (\$)	
	06/26/2024	Lorance, Nancy	!			\$30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75025				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired Resr	piratory Therapist/Professor	Retired			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 108/188 Rpt: 111/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/26/2024 Lorance, Nancy	\$30.00
6 Contributor address; City; State; Zip Code	1
Plano, TX 75025	
8Principal occupation / Job title (See Instructions)9Employer (See Instructions)	5)
Retired Respiratory Therapist/Professor Retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/26/2024 Lorance, Nancy	\$30.00
Contributor address; City; State; Zip Code	4
Plano, TX 75025	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Retired Respiratory Therapist/Professor Retired	-,
	1 · · · · · · · · · · · · · · · · · · ·
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/26/2024 Lorance, Nancy	\$30.00
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Plano, TX 75025	
Contributor address; City; State; Zip Code Plano, TX 75025 Principal occupation / Job title (See Instructions) Employer (See Instructions)	; s)
Contributor address; City; State; Zip Code Plano, TX 75025	s)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	S) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Retired	-
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred         Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred         Contributor address; City; State; Zip Code         Frisco, TX 75035	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred         Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred         Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Fuils         Date         Fuils         Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)	Amount of Contribution (\$) \$40.00 5) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date       Full name of contributor         05/08/2024       Lusk, Fred         Employer (See Instructions)         Principal occupation / Job title (See Instructions)         Retired       Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Ost/28/2024         Lusk, Fred	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date         Full name of contributor         05/08/2024         Lusk, Fred         Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Fuils         Date         Fuils         Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)	Amount of Contribution (\$) \$40.00 5) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions)         Retired Respiratory Therapist/Professor         Date       Full name of contributor         05/08/2024       Lusk, Fred         Employer (See Instructions)         Principal occupation / Job title (See Instructions)         Retired       Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Ost/28/2024         Lusk, Fred	Amount of Contribution (\$) \$40.00 5) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions) Retired Respiratory Therapist/Professor       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)         05/08/2024       Lusk, Fred	Amount of Contribution (\$) \$40.00 5) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions) Retired Respiratory Therapist/Professor       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)         05/08/2024       Lusk, Fred	Amount of Contribution (\$) \$40.00 (5) Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code         Plano, TX 75025         Principal occupation / Job title (See Instructions) Retired Respiratory Therapist/Professor       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)         05/08/2024       Lusk, Fred	Amount of Contribution (\$) \$40.00 (5) Amount of Contribution (\$) \$40.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 109/188 Rpt: 112/260	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	ty Democratic Party		00054753	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/26/2024	Lusk, Fred			\$40.00
	6 Contributor address; City; State; Zip Code			
	Frisco, TX 75035			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/02/2024	Lusk, Fred			\$30.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75035			
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/06/2024	Lusk, Fred			\$30.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75035			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>\</u>	
Retired		Retired	)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/23/2024	Lusk, Fred	)		\$40.00
	Contributor address; City; State; Zip Code			Ψτ0.00
	Continuutor address, City, State, Zip Code			
	Frisco, TX 75035			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/11/2024	Luton, Juie			\$205.67
	Contributor address; City; State; Zip Code			
	Mckinney, TX 75072			
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Writer		Self-employed		

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 110/188 Rpt: 113/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party		00054753
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	02/10/2024	Luton, Juie		\$25.00
		6 Contributor address; City; State; Zip Code		
L	<u> </u>	Mckinney, TX 75072		<u> </u>
8	Principal occu Writer	pation / Job title (See Instructions)	9 Employer (See Instructions	S)
	writer		Self-employed	
	Date	<u> </u>	)	Amount of Contribution (\$)
	01/10/2024	Luton, Juie		\$25.00
		Contributor address; City; State; Zip Code		
		Makinnov TV 75072		
⊢	Dringinglage	Mckinney, TX 75072		
	Writer	pation / Job title (See Instructions)	Employer (See Instructions Self-employed	S)
				1
	Date		)	Amount of Contribution (\$)
	03/13/2024	MARCUS, MAURY		\$100.00
		Contributor address; City; State; Zip Code		
		Plano, TX 75023		
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	3)
╞		Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#: MARCUS, MAURY	)	\$10.00
	03/29/2024			
		Contributor address; City; State; Zip Code		
		Plano, TX 75023		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/29/2024	MARCUS, MAURY	)	\$100.00
		Contributor address; City; State; Zip Code		
		Plano, TX 75023		
$\vdash$	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	
⊢			1	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 111/188 Rpt: 114/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/11/2024			\$60.00
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	\$)
	Full name of contributorout-of-state PAC (ID#:		Amount of Contribution (\$)
Date 06/17/2024	Full name of contributor out-of-state PAC (ID#: MARCUS, MAURY	)	Amount of Contribution (\$) \$100.00
00/1//2024			φτυυ.υυ
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Retired		Retired	<i>''</i>
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/20/2024	MILNE, CALEB	/	\$38.94
	Contributor address; City; State; Zip Code		•
	Mckinney, TX 75072		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Data scientis	st	Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/18/2024	Mackey, Mary		\$50.00
	Contributor address; City; State; Zip Code		1
	Richardson, TX 75082		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Controller		Oil and Gas Industry	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/23/2024	Martin, Carolyn		\$30.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	>\
Nurse Practi		Kelly Wimberly MD	>)

The Instru	ction Guide explains how to complete this f	form.	1         Total pages Schedule A1:           Sch: 112/188 Rpt: 115/260	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Fi	ilers)
	ty Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/23/2024	Martin, Heather			\$25.00
	6 Contributor address; City; State; Zip Code			
	Melissa, TX 75454			
8 Principal occu Consultant	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
		Partner Engineering	1	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/23/2024				\$25.00
	Contributor address; City; State; Zip Code			
	Melissa, TX 75454			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Consultant		Partner Engineering	')	
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
Date 03/23/2024	Full name of contributor out-of-state PAC (ID#: Martin, Heather	)	Amount of Contribution (\$)	\$25.00
0312312024	· · · · · · · · · · · · · · · · · · ·			Φ20.00
	Contributor address; City; State; Zip Code			
	Melissa, TX 75454			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	) \$)	
Consultant		Partner Engineering		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/23/2024	Martin, Heather			\$25.00
	Contributor address; City; State; Zip Code			
	Melissa, TX 75454	<u>.</u>		
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Consultant		Partner Engineering		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/23/2024	Martin, Heather			\$25.00
	Contributor address; City; State; Zip Code			
	Molicea TV 75454			
Dringinal occu	Melissa, TX 75454 upation / Job title (See Instructions)	Employer (See Instructions		
Consultant		Employer (See Instructions Partner Engineering	<i>i)</i>	
Consultant				

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 113/188 Rpt: 116/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		ty Democratic Party		00054753
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	06/23/2024	Martin, Heather		\$25.00
		6 Contributor address; City; State; Zip Code		1
		Melissa, TX 75454		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Consultant		Partner Engineering	
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	01/21/2024	Martinez, Celso	/	\$205.67
	01/21/202.			·
		Contributor address; City; State; Zip Code		
		Makinnay TV 75071		
	Deir singl opp	McKinney, TX 75071		<u> </u>
		upation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	01/22/2024	Mastenbrook, Shirley		\$30.00
		Contributor address; City; State; Zip Code		1
		Plano, TX 75075		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	02/22/2024	Mastenbrook, Shirley		\$30.00
		Contributor address; City; State; Zip Code		•
		Contributor address, Ory, State, Zip Code		
		Plano, TX 75075		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Retired	,	Retired	
				Amount of Contribution (\$)
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	06/22/2024	Mastenbrook, Shirley		\$30.00
		Contributor address; City; State; Zip Code		
		Plano, TX 75075		
		upation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired		Retired	

			1 Total pages Schedule A1:
The Instru	ction Guide explains how to complete this f	orm.	Sch: 114/188 Rpt: 117/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
03/22/2024	Mastenbrook, Shirley		\$30.00
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75075		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	<b>;</b> )
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
04/22/2024	Mastenbrook, Shirley		\$30.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75075		
-	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/22/2024	Mastenbrook, Shirley		\$30.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75075		
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	5)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/04/2024	Matthews, Jeremy		\$62.15
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	
Software En		Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/04/2024	Matthews, Jeremy		\$62.15
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	() ()
Software En		Not Employed	7

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 115/188 Rpt: 118/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor 🔲 out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	06/04/2024	Matthews, Jeremy				\$62.15
		6 Contributor address; City; State; Zip Code		1		
		Plano, TX 75025		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Software En	gineer	Not Employed			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	ŧ:)		Amount of Contribution (\$)	
	03/04/2024	Matthews, Jeremy				\$62.15
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Software En	gineer	Not Employed			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Τ	Amount of Contribution (\$)	
	04/04/2024	Matthews, Jeremy				\$62.15
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Software En	gineer	Not Employed			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	05/04/2024	Matthews, Jeremy				\$62.15
		Contributor address; City; State; Zip Code				
		Plano, TX 75025	<u> </u>			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Software En	gineer	Not Employed			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	06/05/2024	Matthews, Jeremy				\$75.27
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Software En	gineer	Not Employed			

The Instruction	on Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 116/188 Rpt: 119/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin County D	emocratic Party		00054753
4 Date 5	Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/24/2024	Maxey, Brandon		\$205.67
6	Contributor address; City; State; Zip Code		
	Plano, TX 75094	Concentrations	
	ion / Job title (See Instructions)	9 Employer (See Instructions) Mayer LLP	)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
			\$10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		
	ion / Job title (See Instructions)	Employer (See Instructions)	\ \
Sales		Crate and Barrel	)
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
	Full name of contributor out-of-state PAC (ID#: Mayer, Micky	)	Amount of Contribution (\$) \$10.00
			φ10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		
Principal occupati	ion / Job title (See Instructions)	Employer (See Instructions)	)
Sales		Crate and Barrel	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/25/2024	Mayer, Micky		\$10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		
	ion / Job title (See Instructions)	Employer (See Instructions)	)
Sales		Crate and Barrel	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/25/2024	Mayer, Micky		\$10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		
		Employer (Soo Instructions)	N
Sales	ion / Job title (See Instructions)	Employer (See Instructions) Crate and Barrel	)
Jai63			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 117/188 Rpt: 120/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00054753	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	03/25/2024	Mayer, Micky				\$10.00
		6 Contributor address; City; State; Zip Code		"		
		Dallas, TX 75287				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Sales		Crate and Barrel			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	ť:)		Amount of Contribution (\$)	
	03/18/2024	McClain, Kay				\$250.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093	- i			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	ť:)		Amount of Contribution (\$)	
	02/23/2024	McClain, Kay				\$196.37
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired		Retired			
	Date		t:)		Amount of Contribution (\$)	
	03/29/2024	McClain, Kay				\$20.00
		Contributor address; City; State; Zip Code				
		Diana TV 75002				
⊢	Dringing age	Plano, TX 75093	Employer (Cao Instruction			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
╘						
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	<b>#10.00</b>
	03/30/2024	McEwen, Margaret				\$10.00
		Contributor address; City; State; Zip Code				
		Plana TX 75002				
⊢	Drinoinal asso	Plano, TX 75093	Employer (See Instruction			
	Teacher	pation / Job title (See Instructions)	Employer (See Instructions Retired	3)		
⊢	TEACHEI		Nettieu			
1						

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 118/188 Rpt: 121/260
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
02/29/2024			\$10.00
	6 Contributor address; City; State; Zip Code		•
	Plano, TX 75093		
Princinal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Teacher		Retired	») 
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
04/30/2024	McEwen, Margaret		\$10.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Teacher		Retired	"
	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 05/30/2024	Full name of contributor out-of-state PAC (ID#: McEwen, Margaret	)	Amount of Contribution (\$) \$10.00
001001202	Contributor address; City; State; Zip Code		· · · · · ·
	Contributor address, Ory, State, 219 Souce		
	Plano, TX 75093		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Teacher		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2024	McEwen, Margaret		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75093		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	š)
Teacher		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/30/2024	McEwen, Margaret		\$10.00
	Contributor address; City; State; Zip Code		1
	Diana TV 75000		
Dringing age	Plano, TX 75093		-
Principal occu Teacher	upation / Job title (See Instructions)	Employer (See Instructions Retired	3)
Teacher		Relieu	

Collin County Democratic Party 00054753				1 Total pages Schedule A1:	
Collin County Democratic Party       00054753         4 Date       5 Full mame of contributor       out-of-state PAC (D#:)       7 Amount of Contribution (\$)         03/23/2024       6 Contributor address: City: State: Zip Code       7 Amount of Contribution (\$)       \$25.00         8 Principal occupation / Job title (See instructions) attorney       9 Employer (See Instructions) Law Office of Charles McGarry       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         03/19/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         03/19/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         03/19/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         04/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         03/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         04/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         03/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)	The Instru	ction Guide explains how to complete this t	orm.		
4       Date       5       Full name of contributor       out-of state PAC (D#	2 FILER NAME				lers)
03/23/2024       McGarry, Charles       \$25.00         6       Contributor address; City; State; Zip Code       Plano, TX 75093         7       Principal occupation / Job title (See Instructions)       1         attorney       Full name of contributor       out of state PAC (IDE;         03/19/2024       Full name of contributor       out of state PAC (IDE;         03/19/2024       Full name of contributor       out of state PAC (IDE;         03/19/2024       Full name of contributor       out-of-state PAC (IDE;         03/19/2024       Full name of contributor       out-of-state PAC (IDE;         04/16/2024       Full name of contributor       out-of-state PAC (IDE;         04/16/2024       Full name of contributor       out-of-state PAC (IDE;         03/16/2024       Full name of contributor       out-of-s	Collin Count	y Democratic Party		00054753	
6       Contributor address; City; State: Zip Code         Plano, TX 75093       Penployer (See Instructions)         attorney       Law Office of Charles McGarry         Date       Full name of contributor       out-of-state PAC (tox:         03/19/2024       McKinney Area Democratic Club       Amount of Contribution (\$)         S51.83       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         9       Full name of contributor       out-of-state PAC (tox:       Origonal (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Date       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Date       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Date       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Date       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Delivery Manager       Full name of contributor       out-of-state PAC (to#       Origonal (See Instructions)         Delivery Manager       Full name of contributo	4 Date		)	.,	
6       Contributor address; City; State; Zip Code         Plano, TX 75093       Perployer (See Instructions)         attorney       Palae         03/19/2024       Full name of contributor         McKinney, Area Democratic Club       Amount of Contribution (S)         Contributor address; City; State; Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       oxt-of-state PAC (Dir:         O4/16/2024       Full name of contributor       oxt-of-state PAC (Dir:         McKnight, Beatriz       Contributor address; City; State; Zip Code       Amount of Contribution (S)         S20.00       Full name of contributor       oxt-of-state PAC (Dir:       Amount of Contribution (S)         Date       Full name of contributor       oxt-of-state PAC (Dir:       Amount of Contribution (S)         S20.00       McKnight, Beatriz       Contributor address; City; State; Zip Code       Amount of Contribution (S)         S20.00       Full name of contributor       oxt-of-state PAC (Dir:	03/23/2024			5	\$25.00
8       Principal occupation / Job title (See Instructions) attorney       9       Employer (See Instructions) Law Office of Charles McGarry         Date 03/19/2024       Full name of contributor       out-of-state PAC (D#:) McKinney, Area Democratic Club       Amount of Contribution (\$) \$\$1.83         Oaf(s) / 2024       Keikinney, TX 75070       Employer (See Instructions)       Amount of Contribution (\$) \$\$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$) \$\$20.00         Date 04/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$\$20.00         Date 04/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 03/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
8       Principal occupation / Job title (See Instructions) attorney       9       Employer (See Instructions) Law Office of Charles McGarry         Date 03/19/2024       Full name of contributor       out-of-state PAC (D#:) McKinney, Area Democratic Club       Amount of Contribution (\$) \$\$1.83         Oaf(s) / 2024       Keikinney, TX 75070       Employer (See Instructions)       Amount of Contribution (\$) \$\$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$) \$\$20.00         Date 04/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$\$20.00         Date 04/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 03/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor       out-of-state PAC (D#:) McKnight, Beatriz       Amount of Contribution (\$) \$\$20.00         Date 02/16/2024       Full name of contributor <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
attorney       Law Office of Charles McGary         Date       Full name of contributor       out-of-state PAC (DBF         03/19/2024       McKinney, Area Democratic Club		Plano, TX 75093			
Date       Full name of contributor       out-of-state PAC (ID#	8 Principal occu	Ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
03/19/2024       McKinney Area Democratic Club       \$\$51.83         Contributor address; City; State; Zip Code	attorney		Law Office of Charles M	cGarry	
Contributor address; City; State; Zip Code         McKinney, TX 75070         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         McKinght, Beatriz         Contributor address; City; State; Zip Code         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Date         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Delivery Manager         Date         McKinght, Beatriz         Contributor address; City; State; Zip Code         McKinght, Beatriz         Contributor address; City; State; Zip Code         McKinght, Beatriz         Contributor address; City; State; Zip Code         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Ericsson         Date         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Ericsson         Date         O2/16/2024       Full name of contributor         McKinney, TX 75072         Date       Full name of contributor         O2/16/2024       Full name of contributor         McKinght	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       McKinney, TX 75070         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (IDE:)         Amount of Contributor address; City; State; Zip Code       Amount of Contribution (\$)         McKinney, TX 75072       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Full name of contributor       out-of-state PAC (IDE:	03/19/2024			Ś	\$51.83
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/16/2024       McKnight, Beatriz					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/16/2024       McKnight, Beatriz					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/16/2024       McKnight, Beatriz					
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$20.00         04/16/2024       McKnight, Beatriz       \$20.00       \$20.00       \$20.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$20.00         Delivery Manager       Employer (See Instructions)       Ericsson         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/16/2024       McKnight, Beatriz       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Delivery Manager       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Delivery Manager       Contributor					
04/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Full name of contributor       out-of-state PAC (ID#;	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	.)	
04/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Full name of contributor       out-of-state PAC (ID#;			<u> </u>		
Contributor address; City; State; Zip Code         Mckinney, TX 75072         Principal occupation / Job title (See Instructions)         Delivery Manager         Date         6         Vackinney, TX 75072         McKnight, Beatriz         Contributor address; City; State; Zip Code         McKinney, TX 75072         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Date         McKinney, TX 75072         Principal occupation / Job title (See Instructions)         Delivery Manager         Date         Principal occupation / Job title (See Instructions)         Delivery Manager         Date         Principal occupation / Job title (See Instructions)         Delivery Manager         Date         Pull name of contributor         Out-of-state PAC (ID#:         McKnight, Beatriz         Contributor address; City; State; Zip Code         McKnight, Beatriz         Contributor address; City; State; Zip Code         McKnight, Beatriz         McKnight, Beatriz         McKinght, TX 75072         Principal occupation / Job title (See Instructions)         Employer (See Instructions) <td< td=""><td></td><td></td><td>)</td><td></td><td></td></td<>			)		
Mckinney, TX 75072       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/16/2024       McKnight, Beatriz       Amount of Contribution (\$)         03/16/2024       McKninght, Beatriz       \$20.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Employer (See Instructions)         Date       Full name of contributor out-of-state PAC (ID#:         02/16/2024       Full name of contributor out-of-state PAC (ID#:         02/16/2024       Full name of contributor out-of-state PAC (ID#:)         02/16/2024       Full name of contributor out-of-state PAC (ID#:)         02/16/2024       Full name of contributor out-of-state PAC (ID#:)         McKninght, Beatriz       Contributor address; City; State; Zip Code         Mckinney, TX 75072       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions) <td>04/16/2024</td> <td></td> <td></td> <td>4</td> <td>\$20.00</td>	04/16/2024			4	\$20.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/16/2024       McKnight, Beatriz		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/16/2024       McKnight, Beatriz					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/16/2024       McKnight, Beatriz		Mckinnev. TX 75072			
Delivery Manager       Ericsson         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       Full name of contributor address; City; State; Zip Code       \$20.00         Mckinney, TX 75072       Employer (See Instructions)       Employer (See Instructions)         Delivery Manager       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       S20.00       \$20.00         Contributor address; City; State; Zip Code       McKniney, TX 75072       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00	Principal occu		Employer (See Instructions	<u> </u>	
03/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Ericsson         Date       Full name of contributor       out-of-state PAC (ID#:)         McKnight, Beatriz       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Mckinney, TX 75072       McKnight, Beatriz       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00				,	
03/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Ericsson         Date       Full name of contributor       out-of-state PAC (ID#:)         McKnight, Beatriz       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Mckinney, TX 75072       Amount of Contribution (\$)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         McKnight, Beatriz       McKnight, Beatriz       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Mckinney, TX 75072       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00	03/16/2024			.,	\$20.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Ericsson         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Ericsson         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Delivery Manager       Ericsson         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Delivery Manager       Ericsson         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       \$20.00         Mckinney, TX 75072       Mckinney, TX 75072       Employer (See Instructions)		Mckinney, TX 75072			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       McKnight, Beatriz       \$20.00         Contributor address; City; State; Zip Code       McKinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				;)	
02/16/2024 McKnight, Beatriz \$20.00 Contributor address; City; State; Zip Code Mckinney, TX 75072 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Delivery Mar	nager	Ericsson		
Contributor address; City; State; Zip Code         Mckinney, TX 75072         Principal occupation / Job title (See Instructions)         Employer (See Instructions)			)		
Mckinney, TX 75072       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	02/16/2024	-		5	\$20.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Mckinney TX 75072			
			Employer (See Instructions	<u></u>	
	Principal occu	ination / Joh title (See Instructions)			
				<i>''</i>	

-	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 120/188 Rpt: 123/260	
2	FILER NAME			3	Filer ID (Ethics Commission F	-ilers)
		y Democratic Party			00054753	
4 [	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
(	01/16/2024	McKnight, Beatriz				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Mckinney, TX 75072				
<b>8</b> F	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	<u>.</u> 3)		
1	Delivery Mar	nager	Ericsson			
[	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
(	05/16/2024	McKnight, Beatriz				\$20.00
	Contributor address; City; State; Zip Code			1		
		Mckinney, TX 75072				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
[	Delivery Mar	nager	Ericsson			
[	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
(	06/16/2024	McKnight, Beatriz				\$20.00
		Contributor address; City; State; Zip Code		1		
		Mckinney, TX 75072	1			
		Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Delivery Mar		Ericsson	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)	]	Amount of Contribution (\$)	
(	06/05/2024	Mello, Rachel				\$79.47
		Contributor address; City; State; Zip Code		]		
		Plano, TX 75023				
ŀ	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Teacher		Richardson ISD			
F	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Π	Amount of Contribution (\$)	
	05/29/2024	Mello, Rachel				\$39.94
		Contributor address; City; State; Zip Code		ł		
		Plano, TX 75023				
F	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
-	Teacher		Richardson ISD			
-	Teacher		Richardson ISD			

	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 121/188 Rpt: 124/26	0
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
[		y Democratic Party			ľ	00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	01/16/2024	Merrill, Walter					\$103.45
		6 Contributor address; City; S					
		Allen, TX 75002					
8	Principal occu	pation / Job title (See Instructions)	6)	9 Employer (See Instructions	<u>і</u> 5)		
	Mechanical I	Engineer		KBR Inc.			
╞	Date	Full name of contributor		)	Г	Amount of Contribution (\$)	
	06/22/2024	Michael, Sandra	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$103.45
	00/22/2024						<b>Φ103.4</b> 5
		Contributor address; City; S	tate; Zip Code				
		Plano, TX 75023					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/22/2024	Michael, Sandra					\$103.45
			tate <sup>.</sup> Zin Code				
		Plano, TX 75023					
⊢	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u> ເ)		
	Retired		5)	Retired	,		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/22/2024	Michael, Sandra					\$103.45
		Contributor address; City; S	tate; Zip Code				
		Plano, TX 75023					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/22/2024	Michael, Sandra					\$103.45
			tate <sup>.</sup> Zin Code		1		
I		Plano, TX 75023					
⊢	Principal occu	pation / Job title (See Instructions	2)	Employer (See Instructions	<u>ו</u>		
	Retired		2)	Retired	"		
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 122/188 Rpt: 125/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/22/2024	Michael, Sandra		\$103.45
	6 Contributor address; City; State; Zip Code		1
2 Dringing ogg	Plano, TX 75023		<u> </u>
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	3)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/22/2024	Michael, Sandra		\$103.45
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
-	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions	3)
Retired		Retired	<del> </del>
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/09/2024	Michel, Elizabeth		\$30.00
	Contributor address; City; State; Zip Code		
	Mckinney, TX 75070		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Homemaker		Not Employed	<i>'</i>
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/22/2024	Michel, Elizabeth	/	\$51.83
	Contributor address; City; State; Zip Code		•
	Mckinney, TX 75070		
	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Homemaker		Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/19/2024	Michel, Elizabeth		\$40.94
	Contributor address; City; State; Zip Code		1
	Makinpov TV 75070		
Dringing Loogu	Mckinney, TX 75070	1 Employee (Cool Instructions	<u> </u>
Principal occu Homemaker	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	3)
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1         Total pages Schedule A1: Sch: 123/188 Rpt: 126/260           3         Filer ID (Ethics Commission Filers) 00054753          )         7           Amount of Contribution (\$)           \$300.00
00054753          )         7 Amount of Contribution (\$)           \$300.00           \$300.00
00054753          )         7 Amount of Contribution (\$)           \$300.00           See Instructions)            )         Amount of Contribution (\$)          )         Amount of Contribution (\$)           \$3,000.00
\$300.00         \$300.00         See Instructions)        )       Amount of Contribution (\$)         \$3,000.00
See Instructions)          )         Amount of Contribution (\$)           \$3,000.00
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	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 124/188 Rpt: 127/260
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
-		y Democratic Party		00054753
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	04/06/2024	Mott, Rose Anne		\$25.0
		6 Contributor address; City; State; Zip Code		
		McKinney, TX 75070		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Retired Educ	cator	NA	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/06/2024	Mott, Rose Anne		\$25.0
		McKinney, TX 75070		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ()
	Retired Educ		NA	-,
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
	06/06/2024	Full name of contributor out-of-state PAC (ID#: Mott, Rose Anne	)	\$25.0
	00/00/2024	· · · · · · · · · · · · · · · · · · ·		φ25.0
		Contributor address; City; State; Zip Code		
		McKinney, TX 75070		
_	Dringing ogg	pation / Job title (See Instructions)	Employer (See Instructions	
	Retired Educ		NA	15)
╞				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	05/06/2024	Mott, Rose Anne		\$25.0
		Contributor address; City; State; Zip Code		
		McKinney, TX 75070		
		pation / Job title (See Instructions)	Employer (See Instructions	IS)
	Retired Educ		NA	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	01/06/2024	Mott, Rose Anne		\$25.0
		Contributor address; City; State; Zip Code		
		McKinney, TX 75070		
		pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Retired Educ	cator	NA	

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	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 125/188 Rpt: 128/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/06/2024	Mott, Rose Anne				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		McKinney, TX 75070				
			9 Employer (See Instructions	5)		
	Retired Educ	ator	NA			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/21/2024	Moua, Dina				\$50.00
	Contributor address; City; State; Zip Code					
		Richardson, TX 75082				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager		State Farm			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/19/2024	Mucha, Nathaniel				\$224.00
		Contributor address; City; State; Zip Code		]		
	<u> </u>	Wylie, TX 75098				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales		Barclay			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/18/2024	Mukasa-Magoye, Peter				\$6.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> -)		
	Retired		Retired	5)		
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢6.00
	02/18/2024	Mukasa-Magoye, Peter				\$6.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired	>)		

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 126/188 Rpt: 129/260	
2	FILER NAME			3	Filer ID (Ethics Commission F	Filers)
		ty Democratic Party			00054753	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	05/18/2024	Mukasa-Magoye, Peter	,			\$6.00
	1	6 Contributor address; City; State; Zip Code		1		
	I		,			I
	I		,			
		Allen, TX 75002				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
	03/18/2024	Mukasa-Magoye, Peter				\$6.00
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	I		,			ļ
	I		,			I
	I	Allen, TX 75002	,			I
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<b></b> s)		
	Retired		Retired			I
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Τ	Amount of Contribution (\$)	
	04/18/2024	Mukasa-Magoye, Peter	·			\$6.00
		Contributor address; City; State; Zip Code		1		
	I		,			
	I		,			
		Allen, TX 75002				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
$\square$	Date	Full name of contributor out-of-state PAC (ID#		Τ	Amount of Contribution (\$)	
	01/18/2024	Mukasa-Magoye, Peter				\$6.00
	I	Contributor address; City; State; Zip Code				
	I		,			
	I					
		Allen, TX 75002				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#	#:)	$\overline{\Box}$	Amount of Contribution (\$)	
	06/11/2024	Muller, Odette	,			\$25.00
	I	Contributor address; City; State; Zip Code		1		
	I		,			
l	I					
		Richardson, TX 75080				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Analyst		K hovnanian homes			
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The Instru	ction Guide explains how to comple	ete this form.	1 Total pages Schedule A1: Sch: 127/188 Rpt: 130/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state	te PAC (ID#:)	7 Amount of Contribution (\$)
05/11/2024	Muller, Odette		\$25.00
	6 Contributor address; City; State; Zip Code		
	Richardson, TX 75080		
	pation / Job title (See Instructions)	9 Employer (See Instruction	IS)
Analyst		K hovnanian homes	
Date		te PAC (ID#:)	Amount of Contribution (\$)
01/11/2024	Muller, Odette		\$25.00
	Contributor address; City; State; Zip Code	1	
	Disbordson TV 75000		
Drincinal occu	Richardson, TX 75080	Employer (See Instruction	
Analyst		K hovnanian homes	15)
Date 02/11/2024		te PAC (ID#:)	Amount of Contribution (\$) \$25.00
UZ/11/2024		~	φ20.00
	Contributor address; City; State; Zip Code	1	
	Richardson, TX 75080		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	 IS)
Analyst		K hovnanian homes	
Date	Full name of contributor out-of-state	te PAC (ID#:)	Amount of Contribution (\$)
03/11/2024	Muller, Odette		\$25.00
	Contributor address; City; State; Zip Code	9	
	Richardson, TX 75080		
-	ipation / Job title (See Instructions)	Employer (See Instruction	IS)
Analyst		K hovnanian homes	
Date		te PAC (ID#:)	Amount of Contribution (\$)
04/11/2024	Muller, Odette		\$25.00
	Contributor address; City; State; Zip Code	3	
	Disbordson TV 75000		
Dringing oppu	Richardson, TX 75080		
Principal occu Analyst	ipation / Job title (See Instructions)	Employer (See Instruction K hovnanian homes	IS)
ΑΠαιγοι		K Hovitahian homes	

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 128/188 Rpt: 131/26	0
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/21/2024	Munro, Marilyn					\$124.10
		6 Contributor address; City; Sta	ate; Zip Code		1		
		McKinney, TX 75071					
8	Principal occu	pation / Job title (See Instructions)	)	9 Employer (See Instructions	5)		
	Retired			Retired			
⊨	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/21/2024	Munro, Marilyn				,	\$124.10
	Contributor address; City; State; Zip Code				ł		<b>+-</b> ·
	Contributor address, City, State, Zip Code						
		McKinney, TX 75071					
⊢	Principal occupation / Job title (See Instructions) Employer (See Instructions)				<u>ا</u> ج)		
	Retired	putton / 000 the (000 mental ,	,	Retired	-)		
⊢					Т	Account of Contribution (\$)	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#104 10</b>
	04/21/2024						\$124.10
		Contributor address; City; Sta	ate; Zip Code				
		McKinnov TX 75071					
$\vdash$	Dringing ago	McKinney, TX 75071			<u> </u>		
	Retired	pation / Job title (See Instructions)	, ,	Employer (See Instructions Retired	5)		
		<del></del>			<del>.</del>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/21/2024	Munro, Marilyn					\$124.10
		Contributor address; City; Sta					
		McKinney, TX 75071			Ĺ		
		pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Retired			Retired	_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	T	Amount of Contribution (\$)	
	01/21/2024	Munro, Marilyn					\$124.10
		Contributor address; City; Sta	ate; Zip Code		1		
		McKinney, TX 75071					
	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Retired			Retired			

					T		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 129/188 Rpt: 132/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	Collin Count	y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	02/21/2024	Munro, Marilyn					\$124.10
	1	6 Contributor address; City; Sta			1		
-		McKinney, TX 75071	-	<u>1 /2</u>	Ļ		
8		pation / Job title (See Instructions)	)	9 Employer (See Instructions	5)		
	Retired			Retired	—		
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/02/2024	Murray, Cornelia					\$10.53
	Contributor address; City; State; Zip Code			]			
		Friend TV 7E02E					
	Drinsipal agai	Frisco, TX 75035					
	Principal occu Retired	pation / Job title (See Instructions)	1	Employer (See Instructions Retired	3)		
		T			<del>—</del>		
	Date		out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/02/2024	Murray, Cornelia					\$10.53
		Contributor address; City; Sta	ate; Zip Code				
		Frisco, TX 75035					
	Drincinal occu	Ipation / Job title (See Instructions)	<u></u>	Employer (See Instructions			
	Retired		'	Retired	>)		
		Full name of contributor			—	Associated Contribution (\$)	
	Date 06/02/2024	Huil name of contributor Murray, Cornelia	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$10.53
	00/02/2024		ata: Zin Cada				Φ10.99
		Contributor address; City; Sta	ate; Zip Code				
		Frisco, TX 75035					
	Principal occu	I pation / Job title (See Instructions)	)	Employer (See Instructions	⊥ s)		
	Retired	,	I	Retired	,		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	03/02/2024	Murray, Cornelia				,	\$10.53
		Contributor address; City; Sta	ate: Zin Code		$\mathbf{I}$		
			10, <u>-</u> .p 0000				
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	<b></b> 5)		
	Retired		I	Retired			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 130/188 Rpt: 133/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
04/02/2024	Murray, Cornelia		\$10.53
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
8 Principal occu	I Ipation / Job title (See Instructions)	9 Employer (See Instructions	1s)
Retired		Retired	-,
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/02/2024	Murray, Cornelia		\$10.53
	Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
03/27/2024	Murray, Delores		\$20.00
	Contributor address; City; State; Zip Code		
	Fairview, TX 75069		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/27/2024	Murray, Delores		\$20.00
	Contributor address; City; State; Zip Code		
	Fairview, TX 75069		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/27/2024	Murray, Delores		\$20.00
	Contributor address; City; State; Zip Code		1
	Fairview, TX 75069		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 131/188 Rpt: 134/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/10/2024	Nation, Jaden					\$31.18
		6 Contributor address; City; State:			1		
			· •				
		Wylie, TX 75098					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Software En	gineer		USAA			
⊨	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/26/2024	Nebhan, Don	· _	/			\$120.00
		Contributor address; City; State					
		Contributor address, City, State					
		Plano, TX 75025					
⊢	Bringinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired			Retired	)		
	Relieu			Relieu	_		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/27/2024	Neil, Jodee					\$500.00
		Contributor address; City; State			1		
		Dallas, TX 75229					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Simon Greenstone Pana	atie	er	
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/28/2024	Newbill, William	· _	······································			\$60.00
		Plano, TX 75086					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Retired	· · · · · · · · · · · · · · · · · · ·		Retired	,		
⊨	Data	Full name of contributor		``````````````````````````````````````	<u> </u>	Amount of Contribution (ft)	
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢60.00
	03/28/2024	Newbill, William					\$60.00
		Contributor address; City; State	; Zip Code				
		Plano, TX 75086					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
Γ							

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 132/188 Rpt: 135/260	)
2 FILER NAME	3	Filer ID (Ethics Commission	Filers)
Collin County Democratic Party		00054753	
4 Date     5 Full name of contributor     out-of-state PAC (ID#:	_) 7	Amount of Contribution (\$)	\$60.00
6 Contributor address; City; State; Zip Code			
Plano, TX 75086			
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)         Retired       Retired	uctions)		
Date Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
05/28/2024 Newbill, William			\$60.00
Contributor address; City; State; Zip Code			
Plano, TX 75086			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired	uctions)		
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	I	Amount of Contraction ()	¢60.00
04/28/2024 Newbill, William			\$60.00
04/28/2024 Newbill, William Contributor address; City; State; Zip Code			\$60.00
Contributor address; City; State; Zip Code Plano, TX 75086			\$60.00
Contributor address; City; State; Zip Code	uctions)		\$00.00
Contributor address; City; State; Zip Code Plano, TX 75086 Principal occupation / Job title (See Instructions) Employer (See Instru		Amount of Contribution (\$)	\$60.00
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         O1/28/2024    Plano, TX 75086 Employer (See Instructions) Retired	uctions)	Amount of Contribution (\$)	\$60.00
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Plano, TX 75086  Principal occupation / Job title (See Instructions) Retired Date O1/28/2024 Full name of contributor O1/28/2024 Plano, TX 75086 Plano, TX 75086		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         01/28/2024         Newbill, William         Contributor address; City; State; Zip Code		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         01/28/2024         Newbill, William         Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)         Employer (See Instructions)         Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Employer (See Instructions)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         O1/28/2024         Newbill, William         Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired			
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:			\$60.00
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Image: Contributor instruction instructins i			\$60.00
Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         01/28/2024         Newbill, William         Contributor address; City; State; Zip Code         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Plano, TX 75086         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:	) ructions)		\$60.00

The Instruction Guide explains how to complete this form.       Sch: 13:         2       FILER NAME Collin County Democratic Party       3       Filer ID 0005475         4       Date 03/31/2024       5       Full name of contributor out-of-state PAC (ID#:) Nickens, Frederick       7       Amount of Amount of Melissa, TX 75454         8       Principal occupation / Job title (See Instructions) Teacher       9       Employer (See Instructions) PISD       PISD	es Schedule A1: 3/188 Rpt: 136/260 (Ethics Commission Filers) 53 of Contribution (\$) \$10.53 of Contribution (\$) \$10.53
Collin County Democratic Party       0005475         4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Amount of Amount of Contributor address; City; State; Zip Code         03/31/2024       6       Contributor address; City; State; Zip Code       7       Amount of Amount	of Contribution (\$) \$10.53
Collin County Democratic Party       0005475         4 Date       5 Full name of contributor out-of-state PAC (ID#:)       7 Amount of Nickens, Frederick         03/31/2024       6 Contributor address; City; State; Zip Code       7 Amount of Nickens, Frederick         6 Contributor address; City; State; Zip Code       9 Employer (See Instructions)         7 Melissa, TX 75454       9 Employer (See Instructions)         9 Date       Full name of contributor out-of-state PAC (ID#:)         Date       Full name of contributor out-of-state PAC (ID#:)         02/29/2024       Full name of contributor out-of-state PAC (ID#:)	of Contribution (\$) \$10.53
03/31/2024       Nickens, Frederick         6       Contributor address; City; State; Zip Code         Melissa, TX 75454       Melissa, TX 75454         8       Principal occupation / Job title (See Instructions) Teacher       9       Employer (See Instructions) PISD         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Mount of	\$10.53 of Contribution (\$)
6       Contributor address; City; State; Zip Code         Melissa, TX 75454       Melissa, TX 75454         8       Principal occupation / Job title (See Instructions) Teacher       9       Employer (See Instructions) PISD         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Mount o	f Contribution (\$)
6       Contributor address; City; State; Zip Code         Melissa, TX 75454         8       Principal occupation / Job title (See Instructions) Teacher       9       Employer (See Instructions) PISD         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Mount of Mou	
Melissa, TX 75454       9       Employer (See Instructions) PISD         8       Principal occupation / Job title (See Instructions) Teacher       9       Employer (See Instructions) PISD         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contributor         02/29/2024       Nickens, Frederick       Amount of Contributor	
Teacher     PISD       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of an out-of state PAC (ID#:)       02/29/2024     Nickens, Frederick     Amount of an out-of state PAC (ID#:)	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of another contributor       02/29/2024     Nickens, Frederick     Amount of another contributor     Amount of another contributor	
02/29/2024 Nickens, Frederick	
02/29/2024 Nickens, Frederick	
	W10.00
Contributor address; City; State; Zip Code	
Melissa, TX 75454	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Teacher PISD	
Date Full name of contributor out-of-state PAC (ID#:) Amount of	of Contribution (\$)
04/30/2024 Nickens, Frederick	\$10.53
Contributor address; City; State; Zip Code	
Melissa, TX 75454	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Teacher PISD	
	of Contribution (\$)
CC/00/0004 L Niekone Frederick	\$10.53
06/30/2024 Nickens, Frederick	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Melissa, TX 75454	
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions)         Teacher         Employer (See Instructions)         PISD	f Contribution (\$)
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occuration / Job title (See Instructions)         Teacher         Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of the pace of the	of Contribution (\$) \$10.53
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions) Teacher         Date         Full name of contributor         O1/31/2024    See Address (ID#:) Amount of Contributor Address (ID#:)	of Contribution (\$) \$10.53
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions) Teacher         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of 01/31/2024	
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions) Teacher         Date         Full name of contributor         O1/31/2024    See Address (ID#:) Amount of Contributor Address (ID#:)	
Contributor address; City; State; Zip Code       Melissa, TX 75454         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Teacher       PISD         Date       Full name of contributor on out-of-state PAC (ID#:)       Amount of Amount of Contributor address; City; State; Zip Code         01/31/2024       Nickens, Frederick       Contributor address; City; State; Zip Code       Amount of Contributor of Code	
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions) Teacher         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Nickens, Frederick         Contributor address; City; State; Zip Code         Melissa, TX 75454	
Contributor address; City; State; Zip Code         Melissa, TX 75454         Principal occupation / Job title (See Instructions) Teacher         Employer (See Instructions) Teacher         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Nickens, Frederick         Contributor address; City; State; Zip Code	

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	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 134/188 Rpt: 137/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party				00054753	,
4	Date	5 Full name of contributor out-of-state PAC (	(ID#:	)	7	Amount of Contribution (\$)	
	06/22/2024	North, Laura					\$15.00
		6 Contributor address; City; State; Zip Code					
	Dringing ogg	Allen, TX 75013		Employer (See Instructions	<u> </u>		
°		pation / Job title (See Instructions) ject Manager	Jan	Employer (See Instructions AmerisourceBergen	)		
╘	_						
	Date		(ID#:	)		Amount of Contribution (\$)	<b>#15 00</b>
	02/22/2024						\$15.00
		Contributor address; City; State; Zip Code					
		Allen, TX 75013					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
		ject Manager		AmerisourceBergen	,		
⊨	Date	Full name of contributor out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	05/22/2024	North, Laura	(10//	/		, anoant of Contaioation (+)	\$15.00
		Contributor address; City; State; Zip Code					
		Allen, TX 75013					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Program/Pro	ject Manager		AmerisourceBergen			
	Date	Full name of contributor 🔲 out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	04/22/2024	North, Laura					\$15.00
		Contributor address; City; State; Zip Code					
		Allen, TX 75013					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
		ject Manager		AmerisourceBergen	,		
╞	Date	Full name of contributor out-of-state PAC (	(ID# <sup>.</sup>	)		Amount of Contribution (\$)	
	01/22/2024	North, Laura	(	/		(1)	\$15.00
		Contributor address; City; State; Zip Code					
		Allen, TX 75013					
[ ]		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Program/Pro	ject Manager		AmerisourceBergen			

The Instru	ction Guide explains how t	to complete this f	orm.	1	Total pages Schedule A1: Sch: 135/188 Rpt: 138/260	I
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
Collin Count	y Democratic Party				00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
03/22/2024	– North, Laura					\$15.00
	6 Contributor address; City; Stat					
	Allen, TX 75013					
	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
Program/Pro	oject Manager		AmerisourceBergen			
Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
03/05/2024	Nune, Ramakrishna					\$30.00
	Contributor address; City; Stat			1		
	Richardson, TX 75082	,				
-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Retired			Retired	-		
Date	-	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
03/23/2024	Nunn, Jefferson				\$60.00	
	Contributor address; City; Stat					
	Plano, TX 75025					
Drincinal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	<u> </u>		
Consultant			Jefferson Nunn Consulti			
	E			T		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢11 01
03/27/2024						\$44.84
	Contributor address; City; Stat	te; Zip Code				
	Plano, TX 75025					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
Retired			Retired			
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
01/20/2024	O'Reilly, Deborah					\$199.00
		te; Zip Code		1		
	······	, <u>-</u> ,				
	Plano, TX 75025					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Retired			Retired			

			1	Total names Cabadula A1	
The Instru	iction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 136/188 Rpt: 139/26	60
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Collin Count	ty Democratic Party		'	00054753	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
02/20/2024					\$25.00
	6 Contributor address; City; State; Zip Code		"		
	Plano, TX 75025				
	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
01/20/2024					\$25.00
	Contributor address; City; State; Zip Code		"		
	Plano, TX 75025				
-	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
04/06/2024	4/06/2024 Oldner, Cissy				\$25.00
	Contributor address; City; State; Zip Code		1		
 	Mckinney, TX 75072				
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Stay At Hom	1e Mom	None			
Date	Full name of contributor out-of-state PAC (ID#:	)	] ·	Amount of Contribution (\$)	_
03/01/2024	Oldner, Cissy		]		\$25.00
	Contributor address; City; State; Zip Code		1		
Duit singly and	Mckinney, TX 75072				
	upation / Job title (See Instructions)	Employer (See Instructions	S)		
Stay At Hom		None	<del>.                                    </del>		
Date	Full name of contributor out-of-state PAC (ID#:	)	'	Amount of Contribution (\$)	
01/16/2024	-				\$1,392.00
	Contributor address; City; State; Zip Code				
	Makinnay TV 75072				
Drizpipal agai	Mckinney, TX 75072		<u> </u>		
	upation / Job title (See Instructions)	Employer (See Instructions	S)		
Stay At Hom		None			

The Instruc	ction Guide explains how	<i>i</i> to complete this fo	orm.	1	Total pages Schedule A1: Sch: 137/188 Rpt: 140/260	
2 FILER NAME				3	Filer ID (Ethics Commission I	Filers)
	y Democratic Party			ľ	00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
06/01/2024	Oldner, Cissy	_				\$25.00
	6 Contributor address; City; Si	tate; Zip Code		1		
	Mckinney, TX 75072					
8 Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	」 s)		
Stay At Hom		, 	None			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
01/01/2024	Oldner, Cissy					\$25.00
	Contributor address; City; Si			1		
	Mckinney, TX 75072					
Principal occur	pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
Stay At Hom		'	None	-)		
-				<del>—</del>		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷ = = = = =
02/01/2024	Oldner, Cissy					\$25.00
	Contributor address; City; S	tate; Zip Code				
	Mckinney, TX 75072					
Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
Stay At Hom	e Mom		None			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/01/2024	Oldner, Cissy					\$25.00
		tate <sup>.</sup> Zin Code	,	1		
	Mckinney, TX 75072					
Principal occur	pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
Stay At Hom	e Mom		None			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
03/20/2024	Parker, Tonya		/			\$309.95
00/20/2021	-	tata: Zin Cada				φ000.02
	Contributor address; City; Si	ate; Zip Code				
	Dallas TV 75222					
	Dallas, TX 75222	-		Ĺ		
	pation / Job title (See Instructions	i)	Employer (See Instructions	3)		
State District	Judge		Texas			

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 138/188 Rpt: 141/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	I Filers)
	Collin Count	y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/22/2024	Parker, Vickie	_				\$31.18
		6 Contributor address; City; Sta	te; Zip Code				
		Richardson, TX 75082					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Occupationa	I therapist		Self employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/22/2024	Parker, Vickie					\$31.18
		Contributor address; City; Sta	te; Zip Code				
		Richardson, TX 75082					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Occupationa			Self employed	>)		
╞		Full name of contributor			<u> </u>	Amount of Contribution (ft)	
	Date 04/22/2024	Parker, Vickie	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$31.18
	04/22/2024	Contributor address; City; State; Zip Code					Ψ01.10
		Contributor address, City, Sta	ie, zip coue				
		Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Occupationa	l therapist		Self employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/22/2024	Parker, Vickie					\$31.18
		Contributor address; City; Sta	te; Zip Code		1		
		Richardson, TX 75082					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Occupationa	i therapist		Self employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/16/2024	Partida-Kipness, Robbie					\$205.67
		Contributor address; City; Sta	te; Zip Code				
		Dallas, TX 75244					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ร)		
	Judge			Fifth Court of Appeals	-)		
$\vdash$	9-						

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 139/188 Rpt: 142/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date 03/27/2024	5 Full name of contributor out-of-state PAC (ID Plonka, Susan	#:)	7	Amount of Contribution (\$)	\$60.00
		6 Contributor address; City; State; Zip Code				
		Plano, TX 75093				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
	Sr Security E	ngineer	Yum! Brands			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	02/27/2024	Plonka, Susan				\$60.00
		Contributor address; City; State; Zip Code Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	IS)		
	Sr Security E	Engineer	Yum! Brands			
	Date	Full name of contributor out-of-state PAC (ID		Т	Amount of Contribution (\$)	
	05/27/2024	Plonka, Susan				\$60.00
		Contributor address; City; State; Zip Code Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Sr Security E	Engineer	Yum! Brands			
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	04/27/2024	Plonka, Susan				\$60.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
	Principal occu Sr Security E	pation / Job title (See Instructions) Engineer	Employer (See Instructions Yum! Brands	IS)		
	Date 01/27/2024	Full name of contributor out-of-state PAC (ID Plonka, Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$60.00
		Plano, TX 75093				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I IS)		
	Sr Security E		Yum! Brands	- /		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 140/188 Rpt: 143/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/31/2024	Pothier, Kathleen		\$34.00
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75025		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	S)
Self Employe	ed	Positively Proofed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/28/2024	Price, Lance		\$10.00
	Contributor address; City; State; Zip Code		•
	Dallas, TX 75287		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	۱ ۶)
Owner		CD Source	,
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
02/28/2024	Price, Lance	/	\$10.00
0212012024			Ψ±0.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Owner		CD Source	>/
			1
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/28/2024	Price, Lance		\$10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75287		·
-	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Owner		CD Source	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/28/2024	Price, Lance		\$10.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75287		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	S)
Owner		CD Source	

The Instr	ruction Guide explains how to co	nplete this form.	1	1 Total pages Schedule A1: Sch: 141/188 Rpt: 144/260	
2 FILER NAM	 /E			3 Filer ID (Ethics Commission F	-ilers)
	nty Democratic Party			00054753	,
4 Date	5 Full name of contributor out-	f-state PAC (ID#:	) 7	7 Amount of Contribution (\$)	
05/28/202					\$10.00
	6 Contributor address; City; State; Zip				
	Dallas, TX 75287				
8 Principal oc	cupation / Job title (See Instructions)	<b>9</b> Emp	loyer (See Instructions)		
Owner		CD S	Source		
Date	Full name of contributor	f-state PAC (ID#:	)	Amount of Contribution (\$)	
01/28/202	—				\$10.00
		Code			
		2006			
	Dallas, TX 75287				
Principal oc	cupation / Job title (See Instructions)	Emn	loyer (See Instructions)		
Owner			Source		
Date		f-state PAC (ID#:	)	Amount of Contribution (\$)	
04/23/202					\$10.53
	Contributor address; City; State; Zip				
	Plano, TX 75025				
Principal oc	cupation / Job title (See Instructions)		loyer (See Instructions)		
Paralegal		Cate	erpillar Inc.		
Date	Full name of contributor out-	f-state PAC (ID#:	)	Amount of Contribution (\$)	
03/23/202					\$10.53
	Contributor address; City; State; Zip	Code			
		5000			
	Plano, TX 75025				
Principal oc	L cupation / Job title (See Instructions)	Emp	loyer (See Instructions)		
Paralegal			erpillar Inc.		
Date	Full name of contributor			Amount of Contribution (\$)	
		if-state PAC (ID#:	)	Amount of Contribution (\$)	¢20.00
03/01/202					\$20.00
	Contributor address; City; State; Zip	Code			
	Richardson, TX 75082				
Principal oc	cupation / Job title (See Instructions)	Emp	loyer (See Instructions)		
Retired		Reti	red		
		•			
1					

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 142/188 Rpt: 145/260
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date 04/01/2024	5 Full name of contributor out-of-state PAC (ID# Progar, Therese	)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code		
	Richardson, TX 75082		
8 Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)
05/01/2024	Progar, Therese	/	\$20.00
	Contributor address; City; State; Zip Code		
	Richardson, TX 75082		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)
02/01/2024	Progar, Therese		\$20.00
	Contributor address; City; State; Zip Code		
	Richardson, TX 75082		
	pation / Job title (See Instructions)	Employer (See Instructions	6)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)
01/01/2024	Progar, Therese		\$20.00
	Contributor address; City; State; Zip Code		
	Richardson, TX 75082		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	; ;)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#	· )	Amount of Contribution (\$)
01/17/2024	Purkayastha, Subir		\$20.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
-	pation / Job title (See Instructions)	Employer (See Instructions	
Engineer		Brooksource	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 143/188 Rpt: 146/260
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
02/17/2024	Purkayastha, Subir		\$20.00
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Engineer		Brooksource	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/17/2024	Purkayastha, Subir		\$20.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Engineer		Brooksource	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/17/2024	Purkayastha, Subir		\$20.00
	Contributor address; City; State; Zip Code		1
Driv single age	Plano, TX 75023		<u> </u>
Principal occu Engineer	upation / Job title (See Instructions)	Employer (See Instructions Brooksource	3)
-			T
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/17/2024	Purkayastha, Subir		\$20.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Engineer		Brooksource	~
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
02/22/2024	Pursell, Tracy	J	\$31.18
02,22,202	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Data QC		NewSolutions.org	
		<u> </u>	

The Instr	uction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 144/188 Rpt: 147/260	
2 FILER NAM	E		3 Filer ID (Ethics Commission F	-ilers)
	nty Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/22/2024	Pursell, Tracy			\$31.18
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75025			
	cupation / Job title (See Instructions)	9 Employer (See Instructions	)	
Data QC		NewSolutions.org		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/22/2024				\$31.18
	Contributor address; City; State; Zip Code			
	Diana TV 75025			
Dringingligg	Plano, TX 75025	Employer (Cas Instructions	\ \	
Data QC	cupation / Job title (See Instructions)	Employer (See Instructions NewSolutions.org	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	<b>401 10</b>
05/22/2024				\$31.18
	Contributor address; City; State; Zip Code			
	Plano, TX 75025			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	)	
Data QC		NewSolutions.org	)	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/22/2024		)		\$31.18
04/22/202-	Contributor address; City; State; Zip Code			<b>\$51.10</b>
	Contributor address, City, State, Zip Code			
	Plano, TX 75025			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	)	
Data QC		NewSolutions.org		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2024	— —	/		\$31.18
	Contributor address; City; State; Zip Code			
	Plano, TX 75025			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	)	
Data QC		NewSolutions.org		

-	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 145/188 Rpt: 148/260	
<b>2</b> F	FILER NAME			3	Filer ID (Ethics Commission F	Filers)
(	Collin Count	y Democratic Party			00054753	
4 [	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
(	06/13/2024	Radjef, Tarek Lucien				\$10.00
	1	6 Contributor address; City; State; Zip Code		1		
	l					
		Dallas, TX 75287				
			9 Employer (See Instructions	5)		
ľ	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
(	04/13/2024	Radjef, Tarek Lucien				\$10.00
	I	Contributor address; City; State; Zip Code		]		
	I					
	I					
<u> </u>		Dallas, TX 75287	The second se	Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
(	05/13/2024	Radjef, Tarek Lucien		]		\$10.00
	l	Contributor address; City; State; Zip Code				
	I					
	I	Dallas TV 75207				
<u> </u>	Dringing ago	Dallas, TX 75287	Erectories (Coolingtructions	<u> </u>		
	Principal occu Not Employe	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
				<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷•• 000
L L	02/13/2024	Radjef, Tarek Lucien				\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Dallas, TX 75287				
F	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	Not Employe		Not Employed	-,		
	Date			Τ	Amount of Contribution (\$)	
	03/13/2024	Full name of contributor out-of-state PAC (ID#: Radjef, Tarek Lucien	/			\$10.00
	JUI 101 2027			ł		Ψ10.00
	I	Contributor address; City; State; Zip Code				
	l					
	I	Dallas, TX 75287				
F	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	Not Employe		Not Employed	,		
		I				

				_		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 146/188 Rpt: 149/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
_		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/13/2024	Radjef, Tarek Lucien				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75287				
8			9 Employer (See Instructions	3)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/08/2024	Randoing, Susan				\$179.86
		Contributor address; City; State; Zip Code		1		
		Richardson, TX 75082				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Clinical Psyc	hologist	Susan D. Randoing, Psy	уD		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/05/2024	Reeder, Tony				\$50.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75075				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/01/2024	Revitt, Barbara				\$30.00
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/19/2024	Ries, Cathy				\$10.00
		Contributor address; City; State; Zip Code		1		
		Blue Ridge, TX 75424				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Attorney		Self			
		· · · · · ·				

The Instrue	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 147/188 Rpt: 150/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Collin Count	y Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
05/19/2024	Ries, Cathy		\$10.00
	6 Contributor address; City; State; Zip Code		
	Blue Ridge, TX 75424		
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Attorney		Self	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
06/19/2024	Ries, Cathy		\$10.00
	Contributor address; City; State; Zip Code		1
	Blue Ridge, TX 75424	-	
•	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Attorney		Self	
Date	· · · · · · · · · · · · · · · · · · ·	)	Amount of Contribution (\$)
04/19/2024	Ries, Cathy		\$10.00
	Contributor address; City; State; Zip Code		
	Dive Didge TV 75404		
	Blue Ridge, TX 75424		<u> </u>
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self	;)
-			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/19/2024	Ries, Cathy		\$10.00
	Contributor address; City; State; Zip Code		
	Blue Ridge, TX 75424		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Attorney		Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/19/2024	Ries, Cathy		\$10.00
	Contributor address; City; State; Zip Code		
	Blue Ridge, TX 75424	_	
	pation / Job title (See Instructions)	Employer (See Instructions	3)
Attorney		Self	

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	The Instru	ction Guide explains how to complete this	; form.		Total pages Schedule A1: Sch: 148/188 Rpt: 151/260	0
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	
	01/22/2024	Ringness, Jesse				\$199.00
		6 Contributor address; City; State; Zip Code		1		
		Frisco, TX 75035	- i			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Tech		TGSE			
	Date	Full name of contributor Dut-of-state PAC (ID)	#:)	Γ	Amount of Contribution (\$)	
	06/14/2024	Robe, Penny				\$60.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75024		ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Robe Law Firm			
	Date	—	#:)	Ī	Amount of Contribution (\$)	
	03/14/2024	Robe, Penny				\$60.00
		Contributor address; City; State; Zip Code		]		
	Drive sized, oppu	Plano, TX 75024				
		pation / Job title (See Instructions)	Employer (See Instructions Robe Law Firm	5)		
	Attorney			1		
	Date		#:)		Amount of Contribution (\$)	÷00.00
	05/14/2024	Robe, Penny				\$60.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ן ב)		
	Attorney		Robe Law Firm	5)		
╞				T	Amount of Contribution (ft)	
	Date 04/14/2024	Full name of contributor Out-of-state PAC (ID; Robe, Penny	#:)		Amount of Contribution (\$)	\$60.00
	04/14/2024			-		Φ00.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75024				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Robe Law Firm	-,		
-			<u> </u>			

	The Instru	ction Guide explains how to complete t	this forn	n.	1	Total pages Schedule A1: Sch: 149/188 Rpt: 152/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	
-		y Democratic Party			ľ	00054753	i liero)
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:	)	7	Amount of Contribution (\$)	
	01/14/2024	Robe, Penny					\$60.00
		6 Contributor address; City; State; Zip Code					
		Plano, TX 75024					
8		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Robe Law Firm			
	Date	Full name of contributor out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	02/14/2024	Robe, Penny					\$60.00
		Contributor address; City; State; Zip Code					
	Deinsinglasse	Plano, TX 75024		Free laws (O and la structions			
		pation / Job title (See Instructions)		Employer (See Instructions Robe Law Firm	5)		
	Attorney						
	Date	—	C (ID#:	)		Amount of Contribution (\$)	<b>*</b> 1 <b>7</b> 0.00
	01/18/2024	Rodriguez, Angie					\$179.86
		Contributor address; City; State; Zip Code					
		Allen, TX 75002					
_	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Software En			Doordash	,		
	Date	Full name of contributor out-of-state PAC		)		Amount of Contribution (\$)	
	01/18/2024	Rodriguez, Jeanine	5 (ID#	)			\$205.67
		Contributor address; City; State; Zip Code					
		Mckinney, TX 75071					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor 🛛 out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	03/15/2024	Rodriguez, Lorena					\$248.00
		Contributor address; City; State; Zip Code			1		
		Plano, TX 75025					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Professor			Collin College			

	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 150/188 Rpt: 153/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Collin Count	/ Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:	)	7	Amount of Contribution (\$)	
	04/15/2024	Rodriguez, Lorena					\$248.00
		6 Contributor address; City; State; Zip Code					
		Plano, TX 75025					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u>ا</u>		
Ŭ	Professor		Ĩ	Collin College	·)		
	Date	Full name of contributor out-of-state PAC (ID#	t:	)		Amount of Contribution (\$)	
	05/15/2024	Rodriguez, Lorena					\$248.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75025					
⊢	Principal occu	pation / Job title (See Instructions)	-	Employer (See Instructions	<u> </u>		
	Professor			Collin College	9		
╞		Full name of contributor Out-of-state PAC (ID#				Amount of Contribution (\$)	
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID# Rodriguez, Lorena	•:	)		Amount of Contribution (\$)	\$248.00
	00/13/2024	Contributor address; City; State; Zip Code					Ψ240.00
		Contributor address, ony, State, Zip Code					
		Plano, TX 75025					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Professor			Collin College			
	Date	Full name of contributor out-of-state PAC (ID#	t:	)		Amount of Contribution (\$)	
	01/15/2024	Rodriguez, Lorena					\$248.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75025					
_	Principal occu	pation / Job title (See Instructions)	-	Employer (See Instructions	<u> </u>		
	Professor			Collin College	9		
⊨	Date	Full name of contributor Out-of-state PAC (ID#		)		Amount of Contribution (\$)	
	02/15/2024	Full name of contributor Out-of-state PAC (ID# Rodriguez, Lorena	r:	)		Amount of Contribution (\$)	\$248.00
	02/10/2024	Contributor address; City; State; Zip Code					Ψ240.00
		Contributor address, City, State, Zip Code					
		Plano, TX 75025					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Professor			Collin College			

2       FILE NAME       3       Filer ID       (Elhics Commission Filers)         Collin County Democratic Party       00054753       00054753         01/23/2024       §       Full name of contributor       monof-state PAC (Dm)       7         01/23/2024       §       Full name of contributor address: City, State, Zip Code       7       Amount of Contribution (S)         6       Contributor address: City, State, Zip Code       7       Amount of Contribution (S)         6       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)         7       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)         0117/2024       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)         7       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)       \$59.25         7       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)       \$59.25         7       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)       \$205.67         7       Full name of contributor       out-of-state PAC (Dm)       Amount of Contribution (S)       \$205.67		The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 151/188 Rpt: 154/260	)
4       Date       S       Full name of contribution       out-of-state PAC (D#	2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
01/23/2024       Rodriguez Prilliman, Heli       \$616.60         6       Contributor address; City; State; Zip Code       Fort Worth, TX 76107       9       Employer (See Instructions)         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Self Employed         Date       Full name of contributor       ox.ot.et.state PAC (IDI:	_	Collin Count	y Democratic Party			00054753	
6       Contributor address; City; State; Zip Code         Fort Worth, TX 76107       9         8       Principal occupation / Job title (See Instructions)         Self Employed       Amount of Contribution (\$)         01/17/2024       Romanski, Carol         Outrigot occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Retired         Date       Full name of contributor	4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
6       Contributor address; City; State; Zip Code         7       Principal occupation / Job title (See Instructions)         8       Principal occupation / Job title (See Instructions)         9       Employer (See Instructions)         9       Full name of contributor         01/17/2024       Full name of contributor         Allen, TX 75013       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Retired         Date       Full name of contributor         01/17/2024       Full name of contributor         Allen, TX 75013       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor         01/24/2024       Full name of contributor         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Pull name of contributor       out-of-state PAC (ID#)         01/16/2024       Rossouw, Marc       S20.85         Contributor address; City; State; Zip Code       Amount of Contribution (\$)<		01/23/2024					\$616.60
8       Principal occupation / Job title (See Instructions) Entrepreneur       9       Employed (See Instructions) Self Employed         Date 01/17/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date 2000 (Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date; Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 02/16/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount		1					
8       Principal occupation / Job title (See Instructions) Entrepreneur       9       Employed (See Instructions) Self Employed         Date 01/17/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date 2000 (Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date; Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 02/16/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount							
8       Principal occupation / Job title (See Instructions) Entrepreneur       9       Employed (See Instructions) Self Employed         Date 01/17/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/24/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date 2000 (Contributor address; City; State, Zip Code       Amount of Contribution (S)         Date 01/16/2024       Full name of contributor       out-of-state PAC (Dot Date; Contributor address; City; State, Zip Code       Amount of Contribution (S)         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (S)         Date 02/16/2024       Full name of contributor       out-of-state PAC (Dot Contributor address; City; State, Zip Code       Amount			Eart Worth TX 76107				
Entrepreneur       Self Employed         Date       Full name of contributor       out-of-state PAC (DA:       Amount of Contribution (\$)         01/17/2024       Romanski, Carol       \$59.25         Contributor address; City, State; Zip Code       Allen, TX 75013         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (DA:         Date       Full name of contributor       out-of-state PAC (DA:       Amount of Contribution (\$)         01/24/2024       Full name of contributor       out-of-state PAC (DA:       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$205.67         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$205.67         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.85         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.85         Date       Full name of contributor       out-of-state PAC (DA:       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (DA:       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-stat	8	Principal occu	· · · · · · · · · · · · · · · · · · ·	9 Employer (See Instructions	<u>ل</u> ۱		
01/17/2024       Romanski, Carol       \$\$59.25         Contributor address; City; State; Zip Code       Allen, TX 75013         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:					,		
01/17/2024 Romanski, Carol	—	Date	Full name of contributor out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Allen, TX 75013         Principal occupation / Job title (See Instructions)         Retired         Date         01/24/2024         Rossouw, Marc         Contributor address; City; State; Zip Code         Data         01/24/2024         Rossouw, Marc         Contributor address; City, State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Financial advisor         Date         01/16/2024         Full name of contributor		01/17/2024				• -	\$59.25
Allen, TX 75013       Employer (See Instructions) Retired         Date 01/24/2024       Full name of contributor or out-of-state PAC (ID#:) Ressouw, Marc       Amount of Contribution (\$) \$205.67         Date 01/24/2024       Full name of contributor or out-of-state PAC (ID#:) Dallas, TX 75252       Amount of Contribution (\$) \$205.67         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (\$) \$20.85         Date 01/16/2024       Full name of contributor or out-of-state PAC (ID#:) Dallas, TX 75252       Amount of Contribution (\$) \$20.85         Principal occupation / Job title (See Instructions) Financial advisor       Employer (See Instructions) Edward jones       Amount of Contribution (\$) \$20.85         Date 01/16/2024       Full name of contributor or out-of-state PAC (ID#:) Dallas, TX 75252       Amount of Contribution (\$) Edward jones       \$20.85         Date 02/16/2024       Full name of contributor or out-of-state PAC (ID#:) Contributor address; City, State; Zip Code       Amount of Contribution (\$) Edward jones       \$20.85         Date 02/16/2024       Full name of contributor or out-of-state PAC (ID#:) Contributor address; City, State; Zip Code       Amount of Contribution (\$) \$20.85       \$20.85         Contributor address; City, State; Zip Code       Amount of Contribution (\$) \$20.85       \$20.85       \$20.85         Date 02/16/2024       Full name of contributo		I					
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:							
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (D#:)         01/24/2024       Rossouw, Marc       \$205.67         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Dallas, TX 75252       Employer (See Instructions) Financial advisor       Employer (See Instructions) Edward jones         Date       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         01/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         01/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         01/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         01/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Edward jones         Date       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         02/1							
Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:			Allen, TX 75013				
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/24/2024       Rossouw, Marc       \$205.67         Contributor address; City; State; Zip Code       S205.67         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Pallas, TX 75252         Principal occupation / Job title (See Instructions)       Edward jones         Date       Rossouw, Marc         01/16/2024       Rossouw, Marc         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)         02/16/2024       Full name of contributor address; City; State; Zip Code       Amount		Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
01/24/2024       Rossouw, Marc       \$205.67         Contributor address; City; State; Zip Code		Retired		Retired			
Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Financial advisor         Date         01/16/2024         Rossouw, Marc         Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Edward jones         Date         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Financial advisor         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Financial advisor         Date         O2/16/2024         Rossouw, Marc         Contributor address; City; State; Zip Code         Date         Date         Contributor address; City; State; Zip Code         Date         O2/16/2024         Rossouw, Marc         Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         State; Zip Code         Dallas, TX 75252	_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
Dallas, TX 75252       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Data       Dallas, TX 75252       Employer (See Instructions)         Financial advisor       Employer (See Instructions)       \$20.85         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.85         Financial advisor       Employer (See Instructions)       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$20.85         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$20.85         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$20.85         Date       Full name of contributor       out-of-state PAC (ID#:)       Amou		01/24/2024	Rossouw, Marc				\$205.67
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Dallas, TX 75252       Employer (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:			Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Dallas, TX 75252       Employer (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       Date: Zip Code       Date: Zip Code         Dallas, TX 75252							
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Dallas, TX 75252       Employer (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       Date: Zip Code       Date: Zip Code         Dallas, TX 75252							
Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Secondary         Dallas, TX 75252       Employer (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         0allas, TX 75252       Dallas, TX 75252       Employer (See Instructions)       Employer (See Instructions)				]			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         02/16/2024       Full name of contributor       out-of-state PAC (ID#:)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         O2/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Dallas, TX 75252       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					;)		
01/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Image: Contributor address; City; State; Zip Code         Dallas, TX 75252       Dallas, TX 75252       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		Financial adv	visor	Edward jones	_		
Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Financial advisor         Date         Full name of contributor				)	Γ	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Financial advisor         Date         Full name of contributor         O2/16/2024         Rossouw, Marc         Contributor address; City; State; Zip Code         Date         Jultas, TX 75252         Amount of Contribution (\$)         S20.85         Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)		01/16/2024					\$20.85
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		I					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)							
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial advisor       Edward jones         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)			Dallac TV 75252				
Financial advisor       Edward jones         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Full name of contribution (\$)         Dallas, TX 75252       Dallas, TX 75252       Employer (See Instructions)	<u> </u>	Dringinal occu		Employor (Soo Instructions	<u> </u>		
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					)		
02/16/2024       Rossouw, Marc       \$20.85         Contributor address; City; State; Zip Code       Dallas, TX 75252         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	=				_		
Contributor address; City; State; Zip Code         Dallas, TX 75252         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	l			)		Amount of Contribution (\$)	ቀጋብ ወር
Dallas, TX 75252       Principal occupation / Job title (See Instructions)       Employer (See Instructions)		02/10/2024					ֆ20.85
Principal occupation / Job title (See Instructions) Employer (See Instructions)			Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions)	l						
Principal occupation / Job title (See Instructions) Employer (See Instructions)			Dallas. TX 75252				
		Principal occu		Employer (See Instructions	<u>ل</u> ۱		
	l				,		

2       FILER NAME       3       Filer ID (Ethics Commission File 00054753         4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         03/16/2024       5       Full name of contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       \$         03/16/2024       6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       \$         03/16/2024       Dallas, TX 75252       9       Employer (See Instructions)       Full name of contributor       9       Employer (See Instructions)       Edward jones       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	s) 20.85
4       Date       5       Full name of contributor out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         03/16/2024       Rossouw, Marc       6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       \$         03/16/2024       Dallas, TX 75252       Dallas, TX 75252       9       Employer (See Instructions) Edward jones       9         8       Principal occupation / Job title (See Instructions) Financial advisor       9       Employer (See Instructions) Edward jones	20.85
03/16/2024       Rossouw, Marc       \$         6       Contributor address; City; State; Zip Code       \$         Dallas, TX 75252       Dallas, TX 75252         8       Principal occupation / Job title (See Instructions) Financial advisor       9       Employer (See Instructions) Edward jones	20.85
6       Contributor address; City; State; Zip Code         Dallas, TX 75252       Dallas, TX 75252         8       Principal occupation / Job title (See Instructions) Financial advisor       9       Employer (See Instructions) Edward jones	20.85
6       Contributor address; City; State; Zip Code         Dallas, TX 75252       Dallas, TX 75252         8       Principal occupation / Job title (See Instructions) Financial advisor       9       Employer (See Instructions) Edward jones	
8     Principal occupation / Job title (See Instructions)     9     Employer (See Instructions)       Financial advisor     Edward jones	
8     Principal occupation / Job title (See Instructions)     9     Employer (See Instructions)       Financial advisor     Edward jones	
Financial advisor     Edward jones	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
05/16/2024 Rossouw, Marc \$	20.85
Contributor address; City; State; Zip Code	
Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Financial advisor Edward jones	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	20.85
Contributor address; City; State; Zip Code	
Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Financial advisor Edward jones	
Date Full name of contributor out-of-state PAC (ID#: ) Amount of Contribution (\$)	
	20.85
Contributor address; City; State; Zip Code	
Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Financial advisor Edward jones	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	)5.67
Contributor address; City; State; Zip Code	
Dallas, TX 75227	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 153/188 Rpt: 156/26	60
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
<u> </u>		y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	01/28/2024	Sanders, Nancy				\$7,000.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75229				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	retired		na			
F	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
	01/26/2024	Sanders, Nancy				\$3,097.70
		Dallas, TX 75229				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	retired		na	`		
╞	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	06/23/2024	Saraiya, Naishadh				\$30.00
	0012312024	-				φου.υυ
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Retired		Retired	',		
⊨	Date	Full name of contributor Out-of-state PAC (ID#			Amount of Contribution (\$)	
	05/23/2024	Full name of contributor Out-of-state PAC (ID# Saraiya, Naishadh	··)		Amount of Contribution (\$)	\$30.00
	03/23/2024	-				φ30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Retired		Retired	',		
╞	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	02/23/2024	Saraiya, Naishadh	۰			\$30.00
	0212012027	-				ψ00.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75093				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> יו		
	Retired		Retired	"		
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	The Instru	ction Guide explains how to	o complete this fe	orm.	1	Total pages Schedule A1: Sch: 154/188 Rpt: 157/260	
2	FILER NAME				3	Filer ID (Ethics Commission I	Filers)
		ty Democratic Party				00054753	- ,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/23/2024	Saraiya, Naishadh					\$30.00
		6 Contributor address; City; State			ĺ		
		Plano, TX 75093					
8		upation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/23/2024	Saraiya, Naishadh					\$30.00
		Contributor address; City; State			1		
		Plano, TX 75093					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/23/2024	Saraiya, Naishadh	-				\$30.00
		Contributor address; City; State	e; Zip Code				
		Plano, TX 75093					
		upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/03/2024	Saylor, Martha	-				\$34.00
		Contributor address; City; State	e; Zip Code				
		Murphy, TX 75094					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2024	Scholes, Becky					\$10.00
		Contributor address; City; State	e; Zip Code				
		Little Elm, TX 75068					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Accountant			Smart business concept	ts		

The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 155/188 Rpt: 158/260	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
Collin Count	y Democratic Party		00054753	
4 Date	5 Full name of contributor out-of-state PAC	7 Amount of Contribution (\$)		
02/17/2024	Scott, Carol		\$10.00	
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75093			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	
sales		LegalShield		
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
01/17/2024	Scott, Carol			\$10.00
	Contributor address; City; State; Zip Code			
·	Plano, TX 75093			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	s)	
sales		LegalShield		
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
06/17/2024	Scott, Carol			\$10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75093			
-	pation / Job title (See Instructions)	Employer (See Instructions	s)	
sales		LegalShield		
Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
03/17/2024	Scott, Carol			\$10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75093			
	pation / Job title (See Instructions)	Employer (See Instructions	s)	
sales		LegalShield		
Date	Full name of contributor 🔲 out-of-state PAC	) (ID#:)	Amount of Contribution (\$)	
04/17/2024	Scott, Carol			\$10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75093	i		
	ipation / Job title (See Instructions)	Employer (See Instructions	ls)	
sales		LegalShield		

The Instruction Guide explains how to complete this form.	
	1 Total pages Schedule A1: Sch: 156/188 Rpt: 159/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
05/17/2024 Scott, Carol	\$10.00
6 Contributor address; City; State; Zip Code	
Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	ns)
sales LegalShield	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/09/2024 Segall, Ron	\$205.67
Contributor address; City; State; Zip Code	
Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Sales - Manufacturers Representative Self Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/25/2024 Shenoy, Rekha	\$30.00
Contributor address; City; State; Zip Code	
Plano, TX 75025	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
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Principal occupation / Job title (See Instructions) Employer (See Instruction	,
Principal occupation / Job title (See Instructions) Employer (See Instruction Dentist Prism Health of North	Texas Dental Care
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care       Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care       Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care       Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care       Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Plano, TX 75025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instruction Prism Health of North         Dentist       Date       Prism Health of North       Dentist	Amount of Contribution (\$) \$30.00 \$30.00 Is) Texas Dental Care
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instruction Prism Health of North         Dentist       Priscipal occupation / Job title (See Instructions)       Employer (See Instruction Prism Health of North	Amount of Contribution (\$) 
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instruction         Date       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       Employer (See Instruction         Dentist       Employer (See Instructions)       Employer (See Instruction         Date       Full name of contributor       out-of-state PAC (ID#:)         05/25/2024       Shenoy, Rekha       Shenoy, Rekha	Texas Dental Care Amount of Contribution (\$) S30.00 S) Texas Dental Care Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care Amount of Contribution (\$) (\$30.00 (\$) (\$) Texas Dental Care Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instruction         Date       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       Employer (See Instruction         Dentist       Employer (See Instructions)       Employer (See Instruction         Date       Full name of contributor       out-of-state PAC (ID#:)         05/25/2024       Shenoy, Rekha       Shenoy, Rekha	Amount of Contribution (\$) Signal Care Signal Care Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instruction         Date       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       Date         Date       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         05/25/2024       Shenoy, Rekha       Shenoy, Rekha	Amount of Contribution (\$) Signal Care Signal Care Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code         Plano, TX 75025       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       principal occupation / Job title (See Instructions)         Dentist       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         05/25/2024       Shenoy, Rekha       Contributor address; City; State; Zip Code	Texas Dental Care Amount of Contribution (\$) (\$30.00 (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Prism Health of North         Date       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care Amount of Contribution (\$) (\$30.00 (\$) (\$30.00 (\$) (\$30.00 (\$) (\$30.00 (\$) (\$) (\$30.00 (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Dentist       Full name of contributor       out-of-state PAC (ID#:)         04/25/2024       Shenoy, Rekha	Texas Dental Care Amount of Contribution (\$) (\$30.00 (\$) (\$30.00 (\$) (\$30.00 (\$) (\$30.00 (\$) (\$) (\$30.00 (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$) (\$)

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			3 Filer ID (Ethics Commission	Filers)
Democratic Party			00054753	
Full name of contributor	of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
Shenoy, Rekha				\$30.00
Plano, TX 75025	i			
ation / Job title (See Instructions)				
	Pr	ism Health of North 16	exas Dental Care	
	of-state PAC (ID#:	)	Amount of Contribution (\$)	
				\$30.00
Diana TV 7E00E				
			Λ	
Ition / Job title (See instructions)				
Full name of contributor I Lout of	f atata DAC (ID#)		Amount of Contribution (\$)	
	JI-SIALE PAC (ID#	)		**** ***
Shenoy, Rekha			(,,	\$30.00
Shenoy, Rekha				\$30.00
Shenoy, Rekha				\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C				\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025	Code			\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C	Code		)	\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions)	Code En Pr	nployer (See Instructions) ism Health of North Te	) exas Dental Care	\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor	Code	nployer (See Instructions) ism Health of North Te	)	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr	nployer (See Instructions) ism Health of North Te	) exas Dental Care	\$30.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr	nployer (See Instructions) ism Health of North Te	) exas Dental Care	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr	nployer (See Instructions) ism Health of North Te	) exas Dental Care	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr	nployer (See Instructions) ism Health of North Te	) exas Dental Care	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C	Code En Pr of-state PAC (ID#: Code	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023	Code En of-state PAC (ID#: Code	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions)	Code En of-state PAC (ID#: Code	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr of-state PAC (ID#: Code En Re	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr of-state PAC (ID#: Code En Re	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	\$15.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr of-state PAC (ID#: Code En Re	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	\$15.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr of-state PAC (ID#: Code En Re	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	\$15.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy Contributor address; City; State; Zip C Plano, TX 75023 ation / Job title (See Instructions) Full name of contributor out-of Siegel, Nancy	Code En Pr of-state PAC (ID#: Code En Re	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	\$15.00
Shenoy, Rekha Contributor address; City; State; Zip C Plano, TX 75025 ation / Job title (See Instructions) Full name of contributor	Code En Pr of-state PAC (ID#: Code En Code En Code En	nployer (See Instructions) ism Health of North Te	) exas Dental Care Amount of Contribution (\$)	\$15.00
	Democratic Party Full name of contributor out-o Shenoy, Rekha Contributor address; City; State; Zip o Plano, TX 75025 tion / Job title (See Instructions) Full name of contributor out-o Shenoy, Rekha Contributor address; City; State; Zip o Plano, TX 75025 tion / Job title (See Instructions)	Full name of contributor       out-of-state PAC (ID#:	Ion Guide explains how to complete this form.         Democratic Party         Full name of contributor       out-of-state PAC (ID#:)         Shenoy, Rekha	ion Guide explains how to complete this form.       Sch: 157/188 Rpt: 160/260         Sch: 157/188 Rpt: 160/260       3 Filer ID (Ethics Commission 00054753         Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Contribution (\$)         Shenoy, Rekha       7 Amount of Contribution (\$)         Contributor address; City; State; Zip Code       9 Employer (See Instructions)         Plano, TX 75025       9 Employer (See Instructions)         Full name of contributor       out-of-state PAC (ID#:)         Shenoy, Rekha       Amount of Contribution (\$)         Full name of contributor       out-of-state PAC (ID#:)         Shenoy, Rekha       Amount of Contribution (\$)         Full name of contributor       out-of-state PAC (ID#:)         Shenoy, Rekha       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Plano, TX 75025       Employer (See Instructions)         Plano, TX 75025       Employer (See Instructions)         Prism Health of North Texas Dental Care       Prism Health of North Texas Dental Care

			-				
	The Instru	ction Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 158/188 Rpt: 161/260	)
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Collin Count	ty Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/17/2024	Siegel, Nancy					\$15.00
		6 Contributor address; City; State; Z					
		Plano, TX 75023					
8		upation / Job title (See Instructions)		9 Employer (See Instructions)	)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/17/2024	Siegel, Nancy					\$15.00
		Contributor address; City; State; Z					
		Plano, TX 75023					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)	)		
	Retired			Retired			
	Date	Full name of contributor	 out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/17/2024	Siegel, Nancy					\$15.00
		Contributor address; City; State; Z					
		Plano, TX 75023					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/17/2024	Siegel, Nancy					\$15.00
		Contributor address; City; State; Z					
		Plano, TX 75023					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)	)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/27/2024	Simon, Jeffrey					\$205.67
		Contributor address; City; State; Zi	∠ip Code				
		Dallas, TX 75205					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)	;)		
	Attorney			Simon Greenstone Pana	atie	er PC	

The	Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 159/188 Rpt: 162/26	60
2 FILER	RNAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	,
4 Date	Date     5     Full name of contributor     Image: out-of-state PAC (ID#:)			)	7	Amount of Contribution (\$)	
01/20	0/2024	Simon, Yasmin					\$2,000.00
		6 Contributor address; City; State; Zip Code			1		
		Dallas, TX 75205					
		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Attorr	ney			Morgan Lewis			
Date		Full name of contributor out-of-state PAC	(ID#:	)		Amount of Contribution (\$)	
06/23	3/2024	Sisson, Mary					\$30.00
		Contributor address; City; State; Zip Code			1		
		Plano, TX 75023					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
Write	er			Self Employed			
Date		Full name of contributor out-of-state PAC	(ID#:	)		Amount of Contribution (\$)	
04/23	3/2024	Sisson, Mary					\$30.00
		Contributor address; City; State; Zip Code			]		
		Plano, TX 75023			Ĺ		
Princip Write	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
vvnie	;1			Self Employed			
Date			(ID#:	)		Amount of Contribution (\$)	
05/23	3/2024	Sisson, Mary					\$30.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75023					
Princir	inal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
Write				Self Employed	>)		
					-		
Date	2/2024	Full name of contributor out-of-state PAC	(ID#:	)		Amount of Contribution (\$)	¢20.00
03/23	3/2024	Sisson, Mary					\$30.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75023					
Princir	nal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
Write				Self Employed	~)		

	The Instru	ction Guide explains how t	to complete this f	orm.	1	Total pages Schedule A1: Sch: 160/188 Rpt: 163/260	
2	FILER NAME				3	Filer ID (Ethics Commission F	Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/23/2024	Sisson, Mary					\$30.00
		6 Contributor address; City; Stat			1		
		Plano, TX 75023					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Writer			Self Employed			
Γ	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/23/2024	Sisson, Mary					\$30.00
		Contributor address; City; Stat			1		
		Plano, TX 75023					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Writer			Self Employed			
_	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	02/20/2024	Smith, Catherine		/		Amount of Contribution (4)	\$30.00
	02/20/202.		to: Zin Codo				<b>400.00</b>
		Contributor address; City; Stat	le; zip Coue				
		Plano, TX 75023					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Retired	, , , , , , , , , , , , , , , , , , ,		Retired	-,		
╞	Date	Full name of contributor			1	Amount of Contribution (\$)	
	06/22/2024	Smith, David	out-of-state PAC (ID#:	)			\$30.00
	0012212024		ta Ziz Oada				φ30.00
		Contributor address; City; Stat	te; Zip Code				
		Plano, TX 75075					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	Political Con		ļ	self	<i>)</i>		
╞					1	1	
	Date	-	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#20.00</b>
	05/22/2024	Smith, David					\$30.00
		Contributor address; City; Stat	te; Zip Code				
		Plano, TX 75075		 			
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Political Con	sultant		self			

				·			
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 161/188 Rpt: 164/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	- ,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	02/22/2024	Smith, David					\$30.00
	ļ	6 Contributor address; City; St			1		
	1		· ·				
	1						
		Plano, TX 75075					
8		pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		_
	Political Con	sultant		self			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	01/22/2024	Smith, David				• •	\$30.00
	•	Contributor address; City; St			·		
	ļ	Continuation address, City, St	ale, zip coue				
	ļ						
	1	Plano, TX 75075					
<u> </u>	- Drinsipal agai		->				
		<pre>upation / Job title (See Instructions </pre>	s)	Employer (See Instructions	5)		
L	Political Con	sultant		self			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	04/22/2024	Smith, David					\$30.00
	ļ	Contributor address; City; St	State; Zip Code		1		
	1						
	ļ						
	1	Plano, TX 75075					
⊢	Principal occu	I upation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>		
	Political Con		,	self			
⊨	Date	Full name of contributor				Amount of Contribution (\$)	
	03/22/2024		out-of-state PAC (ID#:_	)			\$30.00
	0312212024						<b>Φ</b> 30.00
	1	Contributor address; City; St	tate; Zip Code				
	1						
	ļ	Diana TV 75075					
⊢	- Drinsipal agai	Plano, TX 75075	->				
		<pre>upation / Job title (See Instructions </pre>	ا	Employer (See Instructions	3)		
L	Political Con	sultant		self	_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Ţ	Amount of Contribution (\$)	
	03/22/2024	Snyder, Ann					\$20.00
	1	Contributor address; City; St	State; Zip Code		1		
	ļ						
	ļ						
	ļ	McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions	 s)	Employer (See Instructions	<u> </u>		
	Physician		<i>'</i>	Self	-,		
⊢							

	The Instru	ction Guide explains hov	v to complete this f	form.		1	Total pages Schedule A1: Sch: 162/188 Rpt: 165/260	
2	FILER NAME					3	Filer ID (Ethics Commission	
-		y Democratic Party					00054753	1 11010,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	
	01/22/2024	Snyder, Ann						\$20.00
	I	6 Contributor address; City; S	State; Zip Code			1		
		McKinney, TX 75072						
8		pation / Job title (See Instructions	s)		er (See Instructions	5)		
	Physician			Self				
	Date	Full name of contributor	out-of-state PAC (ID#:_		)	Γ	Amount of Contribution (\$)	
	04/22/2024	Snyder, Ann						\$20.00
	ł	Contributor address; City; S				1		
		McKinney, TX 75072						
		pation / Job title (See Instructions	s)	Employ	er (See Instructions	5)		
	Physician			Self				
	Date	Full name of contributor	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	
	01/29/2024	Snyder, Ann						\$20.00
	I	Contributor address; City; S	State; Zip Code	,		1		
		McKinney, TX 75072						
	-	pation / Job title (See Instructions	S)		er (See Instructions	5)		
	Physician			Self				
	Date	Full name of contributor	out-of-state PAC (ID#:_		)	Γ	Amount of Contribution (\$)	
	06/22/2024	Snyder, Ann						\$20.00
	I	Contributor address; City; S				1		
		McKinney, TX 75072						
		pation / Job title (See Instructions	s)		er (See Instructions	5)		
	Physician			Self				
	Date	Full name of contributor	out-of-state PAC (ID#:_		)	Γ	Amount of Contribution (\$)	
	05/22/2024	Snyder, Ann						\$20.00
		Contributor address; City; S	tate; Zip Code					
		McKinney, TX 75072		·				
		pation / Job title (See Instructions	5)		er (See Instructions	5)		
	Physician			Self				

	The Instru	ction Guide explains how to co	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 163/188 Rpt: 166/260	
2	FILER NAME				3	Filer ID (Ethics Commission F	-ilers)
-		ty Democratic Party				00054753	
4	Date	5 Full name of contributor ou	ut-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/22/2024	Snyder, Ann					\$20.00
	I	6 Contributor address; City; State; Zi	ip Code		1		
		1					
		1					
		McKinney, TX 75072					
8		pation / Job title (See Instructions)	i i i i i i i i i i i i i i i i i i i	9 Employer (See Instructions	3)		
	Physician			Self			
	Date	Full name of contributor	ut-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/29/2024	 Snyder, Ann					\$20.00
	I	Contributor address; City; State; Zi			1		
		1	1				
		1					
		McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Physician			Self			
F	Date	Full name of contributor	ut-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/29/2024	Snyder, Ann					\$20.00
	I		ip Code		1		
			<i>p</i> •••••				
		1					
		McKinney, TX 75072					
	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician			Self			
⊨	Date	Full name of contributor	ut-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/29/2024	Snyder, Ann					\$20.00
							•
			p couc				
		1					
		McKinney, TX 75072					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Physician			Self			
╞	Date	Full name of contributor	ut-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	06/29/2024	Snyder, Ann	1 01 51010 1 7 12 (.=	,			\$20.00
	• • • • • • •		in Code				Ŧ= -
			h cone				
		1					
		McKinney, TX 75072					
⊢	Principal occu	Ipation / Job title (See Instructions)	T	Employer (See Instructions	<u>ار</u> د)		
	Physician			Self	3)		
┝							

The Instruction Guide explains how to complete this form.         2       FILER NAME         Collin County Democratic Party	Total pages Schedule A1: Sch: 164/188 Rpt: 167/260
Collin County Democratic Party       4         Date       5       Full name of contributor       out-of-state PAC (ID#:)       7         05/29/2024       Snyder, Ann       7	
Collin County Democratic Party       4         Date       5       Full name of contributor       out-of-state PAC (ID#:)       7         05/29/2024       Snyder, Ann       7	Filer ID (Ethics Commission Filers)
05/29/2024 Snyder, Ann	00054753
	Amount of Contribution (\$)
	\$20.00
McKinney, TX 75072	
8 Principal occupation / Job title (See Instructions)     9 Employer (See Instructions)	
Physician Self	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/21/2024 Soo, Keng	\$25.00
Contributor address; City; State; Zip Code	
Contributor address, Oity, State, Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/21/2024 Soo, Keng	\$25.00
Contributor address; City; State; Zip Code	
Plano, TX 75074	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/08/2024 Spinell, Michelle	\$359.51
Contributor address; City; State; Zip Code	
Mckinney, TX 75072	
•	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions)Employer (See Instructions)RetiredRetired	
	Amount of Contribution (\$)
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)       06/30/2024     Sprinkel, Elizabeth	Amount of Contribution (\$) \$10.00
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)	
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)       06/30/2024     Sprinkel, Elizabeth	
Retired     Retired       Date     Full name of contributor out-of-state PAC (ID#:)       06/30/2024     Sprinkel, Elizabeth       Contributor address; City; State; Zip Code	
Retired     Retired       Date     Full name of contributor out-of-state PAC (ID#:)       06/30/2024     Sprinkel, Elizabeth       Contributor address; City; State; Zip Code       Plano, TX 75074	
Retired     Retired       Date     Full name of contributor out-of-state PAC (ID#:)       06/30/2024     Sprinkel, Elizabeth       Contributor address; City; State; Zip Code	

The Instru	iction Guide explains how to complete this f	form	1 Total pages S	Schedule A1:	
		orm.		88 Rpt: 168/260	
2 FILER NAME				hics Commission Filers	s)
	ty Democratic Party		00054753		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Co		
02/29/2024				\$1	10.00
	6 Contributor address; City; State; Zip Code				
	Plano, TX 75074				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	)		
retired		Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Co	ontribution (\$)	
01/31/2024				\$1	10.00
	Contributor address; City; State; Zip Code				
	Plano, TX 75074				
-	upation / Job title (See Instructions)	Employer (See Instructions	)		
retired		Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Co		
04/30/2024				21	10.00
	Contributor address; City; State; Zip Code				
	Plano, TX 75074				
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	)		
retired	•	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Co	ontribution (\$)	
05/31/2024				.,	10.00
	Contributor address; City; State; Zip Code				
	Plano, TX 75074				
	upation / Job title (See Instructions)	Employer (See Instructions	)		
retired		Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Co		
03/31/2024				\$1	10.00
	Contributor address; City; State; Zip Code				
	Plano, TX 75074				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	)		
retired		Not Employed	,		

2       FILER NAME Collin County Democratic Party       3       Filer ID (Ethics Con 00054753         4       Date 03/21/2024       5       Full name of contributor out-of-state PAC (ID#:) Stark, Sharon       7       Amount of Contribution         6       Contributor address; City; State; Zip Code	
4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Contributor         03/21/2024       5       Full name of contributor address; City; State; Zip Code       7       Amount of Contributor         6       Contributor address; City; State; Zip Code       7       Frisco, TX 75035       9       Employer (See Instructions)         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution       Amount of Contribution         04/21/2024       Stark, Sharon       Out-of-state PAC (ID#:)       Amount of Contribution	
03/21/2024       Stark, Sharon         6       Contributor address; City; State; Zip Code         Frisco, TX 75035       Frisco, TX 75035         8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution         04/21/2024       Stark, Sharon       Image: Contribution of Contribution       Amount of Contribution	
6       Contributor address; City; State; Zip Code         Frisco, TX 75035         8         Principal occupation / Job title (See Instructions) Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution	
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution         04/21/2024       Stark, Sharon       Out-of-state PAC (ID#:)       Amount of Contribution	
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution         04/21/2024       Stark, Sharon       Stark, Sharon       Amount of Contribution	
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution       04/21/2024     Stark, Sharon     Out-of-state PAC (ID#:)     Amount of Contribution	
04/21/2024 Stark, Sharon	
	n (\$)
	\$10.00
Contributor address; City; State; Zip Code	
Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired	
	· • `
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution       01/01/0004     Stark: Charge     Stark: Charge	
01/21/2024 Stark, Sharon Contributor address; City; State; Zip Code	\$10.00
Frisco, TX 75035	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired	
Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of Contribution	n (\$)
	\$34.00
06/01/2024 Stark, Sharon	\$07.00
06/01/2024 Stark, Sharon Contributor address; City; State; Zip Code	¥07.00
	404.00
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Employer (See Instructions)         Retired	
Contributor address; City; State; Zip Code Frisco, TX 75035  Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired	
Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:)	n (\$)
Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions) Retired         Employer (See Instructions) Retired         Date         Full name of contributor         03/27/2024         Stark, Sharon	n (\$)
Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/27/2024         Stark, Sharon	n (\$)
Contributor address; City; State; Zip Code         Frisco, TX 75035         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/27/2024         Stark, Sharon         Contributor address; City; State; Zip Code	n (\$)

	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 167/188 Rpt: 170/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
[		y Democratic Party			ľ	00054753	1 11010)
4	Date	5 Full name of contributor out-of-state PAC (I	ID#:	)	7	Amount of Contribution (\$)	
	04/17/2024	Stark, Sharon					\$25.00
	ł	6 Contributor address; City; State; Zip Code			1		
	I						
	I	1					
	I	Frisco, TX 75035					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
⊢	Date	Full name of contributor Out-of-state PAC (I	'ID#:	)		Amount of Contribution (\$)	
	03/05/2024	Stark, Sharon	ID			, who are of a contraction (1)	\$34.25
	00,00,202						<b>40</b> 2
	ļ	Contributor address; City; State; Zip Code					
	l						
	I	Frisco, TX 75035					
⊢	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>ו</u>		
	Retired			Retired	9		
					-		
	Date	Full name of contributor out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	06/21/2024	Stark, Sharon					\$10.00
	l	Contributor address; City; State; Zip Code					
	I						
	I						
		Frisco, TX 75035	<u> </u>				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
Γ	Date	Full name of contributor 🔲 out-of-state PAC (I	ID#:	)	Γ	Amount of Contribution (\$)	
	05/21/2024	Stark, Sharon					\$10.00
	1	Contributor address; City; State; Zip Code			1		
	I						
	I						
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
F	Date	Full name of contributor out-of-state PAC (I	ID#:	)		Amount of Contribution (\$)	
	02/21/2024	Stark, Sharon					\$10.00
	ļ	Contributor address; City; State; Zip Code					
	I						
	I						
	I	Frisco, TX 75035					
$\vdash$	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	1 5)		
	Retired			Retired	,		
$\vdash$							
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The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 168/188 Rpt: 171/260	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	ty Democratic Party				00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/01/2024	Stewart, Shawn					\$25.00
	6 Contributor address; City; State;	Zip Code				
	Richardson, TX 75082		• Englisher (Case Instructions	Ĺ		
8 Principal occu Attorney	upation / Job title (See Instructions)		9 Employer (See Instructions Payne & Blanchard LLP			
				1		
Date 04/02/2024		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀጋፍ ሰብ
04/02/2024	Stewart, Shawn					\$25.00
	Contributor address; City; State;	Zip Code				
	Richardson, TX 75082					
Principal occu	I upation / Job title (See Instructions)	ĺ	Employer (See Instructions	<u>ا</u> چ)		
Attorney			Payne & Blanchard LLP			
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
02/01/2024	Stewart, Shawn					\$25.00
	Contributor address; City; State;	Zip Code				
	Richardson, TX 75082			Ĺ		
Principal occu Attorney	upation / Job title (See Instructions)		Employer (See Instructions Payne & Blanchard LLP			
				-		
Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	фо <u>г</u> оо
01/01/2024						\$25.00
	Contributor address; City; State;	Zip Code				
	Richardson, TX 75082					
Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
Attorney			Payne & Blanchard LLP	•		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
03/01/2024	Stewart, Shawn					\$25.00
	Contributor address; City; State;	Zip Code				
	Richardson, TX 75082					
-	upation / Job title (See Instructions)		Employer (See Instructions			
Attorney			Payne & Blanchard LLP			

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 169/188 Rpt: 172/26	60
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00054753	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/01/2024	Stewart, Shawn					\$25.00
		6 Contributor address; City; Sta					
		Richardson, TX 75082					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Attorney			Payne & Blanchard LLP			
⊨	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2024	Street, Fran	_				\$10.00
		Contributor address; City; Sta					
		Allen, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Homemaker			Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/04/2024	Sutka, Jeremy					\$1,000.00
		Contributor address; City; Sta			1		
		McKinney, TX 75070					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ວ		
	CEO			KJMB Solutions, Inc.	,		
╞	Date	Full name of contributor		)		Amount of Contribution (\$)	
	06/18/2024	Sutka, Jeremy		)			\$81.27
		McKinney, TX 75070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	CEO			KJMB Solutions, Inc.			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/20/2024	Sutka, Jeremy					\$100.00
		Contributor address; City; Sta	te; Zip Code				
		McKinney, TX 75070					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			KJMB Solutions, Inc.			

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	The Instru	ction Guide explains how	v to complete this f	iorm.	1	Total pages Schedule A1: Sch: 170/188 Rpt: 173/260	0
2	FILER NAME				3	Filer ID (Ethics Commission	
		ty Democratic Party				00054753	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	01/20/2024	Sutka, Jeremy					\$100.00
		6 Contributor address; City; Si			1		
		McKinney, TX 75070					
8	Principal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions	<u> </u>		
	CEO	•	,	KJMB Solutions, Inc.			
╞	Date	Full name of contributor	Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/20/2024	Sutka, Jeremy				,	\$100.00
		Contributor address; City; Si			ł		
			uite, <u></u> p				
		McKinney, TX 75070					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	CEO			KJMB Solutions, Inc.			
F	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	04/20/2024	Sutka, Jeremy					\$100.00
		Contributor address; City; Si	State; Zip Code		1		
		McKinney, TX 75070			Ĺ		
	Principal occu CEO	pation / Job title (See Instructions	3)	Employer (See Instructions KJMB Solutions, Inc.	5)		
╘		<u> </u>			<del>.</del>		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<b>*</b> 100.00
	03/20/2024						\$100.00
		Contributor address; City; St	tate; Zip Code				
		McKinney, TX 75070					
$\vdash$	Principal occu	Ipation / Job title (See Instructions	<u>s)</u>	Employer (See Instructions	 5)		
	CEO	pane	-)	KJMB Solutions, Inc.	-,		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/20/2024	Sutka, Jeremy		/		Allount of Contribution (4)	\$100.00
	00,20,212	Contributor address; City; Si	state <sup>.</sup> Zin Code		ł		<b>#±•••</b> •••
		McKinney, TX 75070					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	CEO			KJMB Solutions, Inc.			

	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 171/188 Rpt: 174/260	D
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
-		y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state PAC (IE	D#:	)	7	Amount of Contribution (\$)	
	03/18/2024	Tacher, Mary					\$188.50
		6 Contributor address; City; State; Zip Code					
		1					
		Plano, TX 75093					
8		upation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	06/10/2024	Taddiken, Mary					\$40.94
		Contributor address; City; State; Zip Code					
		1					
		1					
		Lucas, TX 75002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor Out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	04/18/2024	Taddiken, Mary					\$100.00
	-	Contributor address; City; State; Zip Code					
		1					
		Lucas, TX 75002					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (IE	D#:	)	Γ	Amount of Contribution (\$)	
	05/26/2024	Taite, Blondene					\$25.00
		Contributor address; City; State; Zip Code					
		1					
		Mckinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (IE	D#:	)		Amount of Contribution (\$)	
	01/26/2024	Taite, Blondene					\$25.00
		Contributor address; City; State; Zip Code					
		1					
		Mckinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			

2       File IP MAKE Collin County Democratic Party       3       File I/D       (Ehics Commission Filers) 00054753         4       Date 06/26/2024       5       File Iran of contributor       one of state PAC (10#	Т	 Γhe Instru	ction Guide explains how to complete	te this for	rm.	1	Total pages Schedule A1: Sch: 172/188 Rpt: 175/26	30
4       Date       6       Full name of contributor       out-of-state PAC (DBF       7       Amount of Contribution (\$)       \$25.00         6       Contributor address; City, State; Zip Code       7       Amount of Contribution (\$)       \$25.00         7       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired       Amount of Contribution (\$)       \$25.00         7       Amount of Contribution       out-of-state PAC (DBF       Amount of Contribution (\$)       \$25.00         7       Full name of contributor       out-of-state PAC (DBF       Amount of Contribution (\$)       \$25.00         7       Full name of contributor       out-of-state PAC (DBF       Amount of Contribution (\$)       \$25.00         7       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Retired         7       Taite, Blondene       State; Zip Code       Amount of Contribution (\$)       \$25.00         03/26/2024       Full name of contributor       out-of-state PAC (DBF       Amount of Contribution (\$)       \$25.00         02/26/2024       Full name of contributor       out-of-state PAC (DBF       Amount of Contribution (\$)       \$25.00         02/26/2024       Full name of contributor       out-of-state PAC (DBF       Amount of Contribution (\$)	<b>2</b> F	-ILER NAME				3	Filer ID (Ethics Commissio	on Filers)
06/26/2024       Taite, Blondene       \$25.00         6       Contributor address; City; State; Zip Code       Retired         7       Retired       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired       Amount of Contribution (S) S25.00         04/26/2024       Full name of contributor       pure-state PAC (IDF:	C	Collin Count	y Democratic Party				00054753	
6       Contributor address; City; State; Zip Code         Mckinney, TX 75072       9         8       Principal occupation / Job title (See Instructions) Retired       9         Date 04/26/2024       Full name of contributor	<b>4</b> C	Date	5 Full name of contributor out-of-state F	PAC (ID#:	)	7	Amount of Contribution (\$)	
6       Contributor address: City: State; Zip Code         Mckinney, TX 75072       Principal occupation / Job title (See Instructions) Retired       Amount of Contribution (\$)         Date 04/26/2024       Full name of contributor out-of-state PAC (De:	С	)6/26/2024						\$25.00
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date 04/26/2024       Full name of contributor       out-of-state PAC (DDF       Amount of Contribution (\$) S25.00         O4/26/2024       Full name of contributor       out-of-state PAC (DDF       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         Date 03/26/2024       Full name of contributor       out-of-state PAC (DDF       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         O2/26/2024       Full name of contributor       out-of-state PAC (DEF       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S1,000.00         Oate       Full name of contributor       out-of-state PAC (DEF       Amount of Contribution (\$) S1,000.00         O								
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date 04/26/2024       Full name of contributor out-of-state PAC (Dir:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Date 03/26/2024       Full name of contributor out-of-state PAC (Dir:		I						
Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#;			Mckinney, TX 75072					
Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         04/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (ID#)         03/26/2024       Full name of contributor       out-of-state PAC (ID#)         03/26/2024       Full name of contributor       out-of-state PAC (ID#)         03/26/2024       Full name of contributor       out-of-state PAC (ID#)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         01/29/2024 </td <td><b>8</b> F</td> <td>rincipal occu</td> <td>pation / Job title (See Instructions)</td> <td>9</td> <td>Employer (See Instructions</td> <td>)</td> <td></td> <td></td>	<b>8</b> F	rincipal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
04/26/2024       Taite, Blondene       \$25.00         Contributor address; City, State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (IDF:         03/26/2024       Taite, Blondene       Amount of Contribution (\$)         Contributor address; City, State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (IDF:         02/26/2024       Full name of contributor       out-of-state PAC (IDF:       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (IDF:       Amount of Contribution (\$)         02/26/2024       Full name of contributor       Employer (See Instructions)       \$25.00         Contributor address; City, State; Zip Code       Mckinney, TX 75072       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$1000.00         Contrib	F	Retired			Retired			
04/26/2024       Taite. Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#:	C	Date	Full name of contributor 🛛 out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date 03/26/2024       Full name of contributor or out-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date 02/26/2024       Full name of contributor out-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) \$25.00         Date 02/26/2024       Full name of contributor out-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) \$25.00         Oate 02/26/2024       Full name of contributor out-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) \$25.00         Contributor address; City; State; Zip Code       Employer (See Instructions) Retired       Amount of Contribution (\$) \$1,000.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$1,000.00         Date 01/29/2024       Full name of contributor out-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Contributor address; City; State; Zip Code       Dallas, TX 75201       Amount of Contribution (\$)	C	)4/26/2024	Taite, Blondene					\$25.00
Mckinney, TX 75072       Employer (See Instructions) Retired         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date 03/26/2024       Full name of contributor out-of-state PAC (IDE:) Taite, Blondene Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25,00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25,00         Date Od/26/2024       Full name of contributor out-of-state PAC (IDE:) Out-of-state PAC (IDE:)       Amount of Contribution (\$) \$25,00         Date O2/26/2024       Full name of contributor out-of-state PAC (IDE:) Mckinney, TX 75072       Amount of Contribution (\$) \$25,00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25,00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25,00         Date O1/29/2024       Full name of contributor out-of-state PAC (IDE:) The Ken Molberg Campaign Committee Contributor address; City; State; Zip Code Dallas, TX 75201       Amount of Contribution (\$) \$1,000,00		l						
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date 03/26/2024       Full name of contributorout-of-state PAC (ID#:) Taite, Blondene Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Date 02/26/2024       Full name of contributorout-of-state PAC (ID#:) Anount of Contribution (\$) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$1,000.00         Date 01/29/2024       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$) Lallas, TX 75201       Amount of Contribution (\$)		I						
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date 03/26/2024       Full name of contributorout-of-state PAC (ID#:) Taite, Blondene Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Date 02/26/2024       Full name of contributorout-of-state PAC (ID#:) Anount of Contribution (\$) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$1,000.00         Date 01/29/2024       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$) Lallas, TX 75201       Amount of Contribution (\$)		I						
Retired       Retired         Date 03/26/2024       Full name of contributor		I	Mckinney, TX 75072					
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         Advinue, TX 75072       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         02/26/2024       Full name of contributor       out-of-state PAC (ID#:)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Wckinney, TX 75072       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)         O1/29/2024       Full name of contributor       out-of-state PAC (ID#:)         O1/29/2024       Full name of contributor       out-of-state PAC (ID#:)         O1/29/2024       Full name of contributor       out-of-state PAC (ID#:)         O1/2	F	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
03/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         02/26/2024       Full name of contributor       out-of-state PAC (ID#:)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Setired         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/29/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/29/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$1,000.00         Other of contributor address; City; State; Zip Code       out-of-state PAC (ID#:) <t< td=""><td>F</td><td>Retired</td><td></td><td></td><td>Retired</td><td></td><td></td><td></td></t<>	F	Retired			Retired			
03/26/2024       Taite, Blondene       \$25.00         Contributor address; City, State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor out-of-state PAC (ID#;)         Date       Full name of contributor out-of-state PAC (ID#;)         O2/26/2024       Full name of contributor out-of-state PAC (ID#;)         Mckinney, TX 75072       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Contributor address; City; State; Zip Code         Mckinney, TX 75072       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Setind         Date       Full name of contributor out-of-state PAC (ID#;)         Amount of Contribution (\$)       St1,000.00         O1/29/2024       The Ken Molberg Campaign Committee       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Dallas, TX 75201       Amount of Contribution (\$)	C	Date	Full name of contributor 🛛 out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code	с	)3/26/2024		-				\$25.00
Mckinney, TX 75072       Employer (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor       out-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) \$25.00         02/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor out-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) S1,000.00         O1/29/2024       Full name of contributor out-of-state PAC (ID#:) Dallas, TX 75201       Amount of Contribution (\$)	l	I						
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributorout-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) S226/2024         O2/26/2024       Taite, Blondene       \$\$25.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$) Mckinney, TX 75072         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         01/29/2024       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Data       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Data       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$) \$1,000.00         Dallas, TX 75201       Dallas, TX 75201       Amount of Contributor		I	1					
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributorout-of-state PAC (ID#:) Taite, Blondene       Amount of Contribution (\$) S226/2024         O2/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       \$25.00         Mckinney, TX 75072       Employer (See Instructions) Retired         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         01/29/2024       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         Date       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         Data       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         Data       Full name of contributorout-of-state PAC (ID#:) The Ken Molberg Campaign Committee         Data       Dallas, TX 75201	l	I						
Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       S25.00         Mckinney, TX 75072       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Full name of contributor			Mckinney, TX 75072					
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       Mckinney, TX 75072         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor         O1/29/2024       Full name of contributor         O1/29/2024       The Ken Molberg Campaign Committee         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       The Ken Molberg Campaign Committee       \$1,000.00         Contributor address; City; State; Zip Code       Dallas, TX 75201       Amount of Contribution (\$	P	vrincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
02/26/2024       Taite, Blondene       \$25.00         Contributor address; City; State; Zip Code       \$25.00         Mckinney, TX 75072       Mckinney, TX 75072         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor out-of-state PAC (ID#:) The Ken Molberg Campaign Committee       Amount of Contribution (\$)         01/29/2024       The Ken Molberg Campaign Committee       \$1,000.00         Dallas, TX 75201       Dallas, TX 75201       Full name of contribution (\$)	F	Retired			Retired			
Contributor address; City; State; Zip Code         Mckinney, TX 75072         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor		Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
Mckinney, TX 75072     Employer (See Instructions) Retired       Principal occupation / Job title (See Instructions) Retired     Employer (See Instructions) Retired       Date     Full name of contributor out-of-state PAC (ID#:) The Ken Molberg Campaign Committee     Amount of Contribution (\$) \$1,000.00       O1/29/2024     The Ken Molberg Campaign Committee Contributor address; City; State; Zip Code     Amount of Contribution (\$) \$1,000.00	С	)2/26/2024	Taite, Blondene					\$25.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         01/29/2024       The Ken Molberg Campaign Committee         Contributor address; City; State; Zip Code       \$1,000.00         Dallas, TX 75201       Dallas, TX 75201		1	Contributor address; City; State; Zip Code					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         01/29/2024       The Ken Molberg Campaign Committee         Contributor address; City; State; Zip Code       \$1,000.00         Dallas, TX 75201       Dallas, TX 75201		I						
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired         Date       Full name of contributor out-of-state PAC (ID#:)         01/29/2024       The Ken Molberg Campaign Committee         Contributor address; City; State; Zip Code       \$1,000.00         Dallas, TX 75201       Dallas, TX 75201		I						
Retired     Retired       Date     Full name of contributor     out-of-state PAC (ID#:)       01/29/2024     The Ken Molberg Campaign Committee     Amount of Contribution (\$)       Contributor address; City; State; Zip Code     \$1,000.00       Dallas, TX 75201     Dallas, TX 75201			Mckinney, TX 75072					
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/29/2024       The Ken Molberg Campaign Committee       \$1,000.00         Contributor address; City; State; Zip Code       Dallas, TX 75201			pation / Job title (See Instructions)			)		
01/29/2024 The Ken Molberg Campaign Committee \$1,000.00 Contributor address; City; State; Zip Code Dallas, TX 75201	F	Retired			Retired			
Contributor address; City; State; Zip Code Dallas, TX 75201		Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
Dallas, TX 75201	C	)1/29/2024	The Ken Molberg Campaign Committee	е				\$1,000.00
		I	Contributor address; City; State; Zip Code					
		I						
		I						
Principal occupation / Job title (See Instructions) Employer (See Instructions)			Dallas, TX 75201					
	P	vrincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 173/188 Rpt: 176/260
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	ty Democratic Party		00054753
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
03/19/2024	Tijerina, Christopher		\$41.96
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75025		
	upation / Job title (See Instructions)	9 Employer (See Instructions)	)
communicat	tions Specialist	Nokia	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/10/2024	Tijerina, Michael		\$60.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
	upation / Job title (See Instructions)	Employer (See Instructions)	)
Home Health	n	Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/10/2024	Tijerina, Michael		\$60.00
	Contributor address; City; State; Zip Code		
B. indian	Plano, TX 75025		
Principal occu Home Health	upation / Job title (See Instructions)	Employer (See Instructions)	
		Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/10/2024	Tijerina, Michael		\$60.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	) )
Home Health		Self	)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
06/10/2024	Tijerina, Michael	/	\$60.00
00,10,202.	Contributor address; City; State; Zip Code		+
	Continuutor audress, City, State, Zip Code		
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)
Home Health		Self	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 174/188 Rpt: 177/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/10/2024	Tijerina, Michael				\$60.00
	I	6 Contributor address; City; State; Zip Code				
	I	1				
		Plano, TX 75025				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Home Health	1	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/10/2024	Tijerina, Michael				\$60.00
	l	Contributor address; City; State; Zip Code				
	I	1				
	I	1				
		Plano, TX 75025				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Home Health	1	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/03/2024	Tijerina, Michael				\$97.67
		Contributor address; City; State; Zip Code				
	I	1				
	I	1				
		Plano, TX 75025				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Home Health	1	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/23/2024	Tijerina, Michael				\$60.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	I	Diana TV 75005				
┝	Dringingl oogu	Plano, TX 75025	Employer (See Instructions	$\square$		
	Home Health	pation / Job title (See Instructions)	Employer (See Instructions	9		
⊨				_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>4005 67</b>
	01/14/2024	Tony Adams for TX house district 61				\$205.67
	I	Contributor address; City; State; Zip Code				
	I	1				
	I	The Colony, TX 75056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ເ)		
	1 1110.000.22.2			''		
		I				

The Instruction Guide explains how to complete this form.       3         2 FILER NAME       3         Collin County Democratic Party       3	Total pages Schedule A1: Sch: 175/188 Rpt: 178/260
Collin County Democratic Party	0011. 110/100 Kpt. 110/200
Collin County Democratic Party	Filer ID (Ethics Commission Filers)
4 Date     5 Full name of contributor     out-of-state PAC (ID#:)     7	00054753
	Amount of Contribution (\$)
06/17/2024 Treat, Alena	\$10.53
6 Contributor address; City; State; Zip Code	
Princeton, TX 75407	
8         Principal occupation / Job title (See Instructions)         9         Employer (See Instructions)	
Retired Retired	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/17/2024 Treat, Alena	\$10.53
Contributor address; City; State; Zip Code	
Princeton, TX 75407	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired Retired	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/17/2024 Treat, Alena	\$10.53
Contributor address; City; State; Zip Code	
Princeton, TX 75407	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Retired Retired	
	Amount of Contribution (\$)
03/10/2024 Truesdale, Larry	\$50.00
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code McKinney, TX 75071	
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Technology Audit Principal         Employer (See Instructions)         Salesforce	
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions) Technology Audit Principal         Employer (See Instructions) Salesforce         Date       Full name of contributor	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Technology Audit Principal         Employer (See Instructions)         Salesforce	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions) Technology Audit Principal         Employer (See Instructions) Salesforce         Date       Full name of contributor	
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Technology Audit Principal         Date       Full name of contributor         O4/10/2024       Truesdale, Larry	τ,
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Technology Audit Principal         Date         Full name of contributor         Out-of-state PAC (ID#:)         Truesdale, Larry         Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions) Technology Audit Principal         Date       Full name of contributor         O4/10/2024       Full name of contributor         O4/10/2024       Truesdale, Larry         Contributor address; City; State; Zip Code         McKinney, TX 75071	τ,
Contributor address; City; State; Zip Code         McKinney, TX 75071         Principal occupation / Job title (See Instructions)         Technology Audit Principal         Date         Full name of contributor         Out-of-state PAC (ID#:)         Truesdale, Larry         Contributor address; City; State; Zip Code	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
	Sch: 176/188 Rpt: 179/260
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
05/10/2024 Truesdale, Larry	. \$50.00
6 Contributor address; City; State; Zip Code	
McKinney, TX 75071	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	s)
Technology Audit Principal Salesforce	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2024 Truesdale, Larry	\$50.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	s)
Technology Audit Principal Salesforce	
Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/10/2024 Truesdale, Larry	\$50.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	
Technology Audit Principal Salesforce	o)
	Amount of Contribution (\$)
Date     Full name of contributor     out-of-state PAC (ID#:)       06/13/2024     Truesdale, Larry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ls)
Technology Audit Principal Salesforce	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/13/2024 Truesdale, Larry	\$50.00
Contributor address; City; State; Zip Code	
McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Employer (See Instruction	s)
Technology Audit Principal Salesforce	

The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 177/188 Rpt: 180/260	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	y Democratic Party		00054753	,
4 Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)	
01/13/2024	Truesdale, Larry		\$5	50.00
	6 Contributor address; City; State; Zip Code			
	McKinney, TX 75071	i		
	ipation / Job title (See Instructions)	9 Employer (See Instruction	ns)	
Technology	Audit Principal	Salesforce		
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)	
02/13/2024	Truesdale, Larry			50.00
	Contributor autress, City, State, Lip Coue			
	McKinney, TX 75071			
Dringing ogg	-	Employer (See Instruction	>	
	upation / Job title (See Instructions)	Employer (See Instruction	ns)	
Technology	Audit Principal	Salesforce		
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)	
03/13/2024	Truesdale, Larry		\$5	50.00
	Contributor address; City; State; Zip Code			
	McKinney, TX 75071			
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Audit Principal	Salesforce		
Date		AC (ID#:)	Amount of Contribution (\$)	
04/13/2024	Truesdale, Larry		\$t	50.00
	Contributor address; City; State; Zip Code			
	McKinney, TX 75071			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	ns)	
Technology	Audit Principal	Salesforce		
Date	Full name of contributor Out-of-state PA		Amount of Contribution (\$)	
06/16/2024	Turner, Sue	с (ID#,		25.00
00/10/202				20.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75252			
	ipation / Job title (See Instructions)	Employer (See Instruction	ns)	
Retired		Retired		
		I		
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	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 178/188 Rpt: 181/260	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-state F	PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/16/2024	Turner, Sue					\$25.00
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75252					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
	01/16/2024	Turner, Sue					\$25.00
	0_/_0/_0_						+20100
		Contributor address, City, State, Zip Code					
		Dallas, TX 75252					
⊢	Dringinglaggy		——————————————————————————————————————				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired	_		
	Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	_
	05/16/2024	Turner, Sue					\$25.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75252					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
╞	Date	Full name of contributor Out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
	03/16/2024	Turner, Sue		,			\$25.00
	00,10,2.2	· · · · · · · · · · · · · · · · · · ·					Ψ <b>Δ</b> Ο
		Contributor address; City; State; Zip Code					
		Dallas, TX 75252					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L;)		
	Retired			Retired	,		
╞				,	1	1	
	Date	Full name of contributor out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 25 00
	04/16/2024	Turner, Sue					\$25.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75252					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
			<b>I</b>				

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 179/188 Rpt: 182/260	)
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/05/2024	Valenzuela, Candace				\$290.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75287				
8			9 Employer (See Instructions	5)		
	EDUCATOR		SELF EMPLOYED			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/17/2024	Vasta, Beverly				\$205.67
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe		Not employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 10.00
	01/03/2024	Vasta, Beverly				\$10.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Not employe		Not employed	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	02/03/2024	Vasta, Beverly	)			\$10.00
	01,00,101	Contributor address; City; State; Zip Code				+_0.00
		Allen, TX 75013				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/03/2024	Vasta, Beverly				\$10.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			

The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1:	
	•	•		Ļ	Sch: 180/188 Rpt: 183/260	
2 FILER NAME	y Democratic Party			3	Filer ID (Ethics Commission F 00054753	-ilers)
				Ļ		
4 Date 04/03/2024	5 Full name of contributor Vasta, Beverly	out-of-state PAC (ID#:	)	ľ	Amount of Contribution (\$)	\$10.00
04/03/2024		tata: Zin Cada				Φ10.00
	6 Contributor address; City; S	tate; Zip Code				
	Allen, TX 75013					
8 Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	<b>s</b> )		
Not employe	d:		Not employed			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/03/2024	Vasta, Beverly	_				\$10.00
	Contributor address; City; S			"		
	Allen, TX 75013	·		Ĺ		
	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
Not employe			Not employed	<del>—</del>		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷10.00
06/03/2024						\$10.00
	Contributor address; City; S	tate; Zip Code				
	Allen, TX 75013					
Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	⊥ s)		
Not employe		,	Not employed	,		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
03/11/2024	WELLS, JERRY					\$10.00
		tate; Zip Code				
	Plano, TX 75023					
	pation / Job title (See Instructions	3)	Employer (See Instructions	s)		
Attorney			Self Employed			
Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
03/23/2024	Waddell, Chris					\$10.00
	Contributor address; City; S	tate; Zip Code				
	Frisco, TX 75036					
Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>ر)</u>		
Human Reso		<i>)</i>	Self	3)		
	501022					

					-		
	The Instru	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 181/188 Rpt: 184/26	60
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		/ Democratic Party				00054753	
4	Date	5 Full name of contributor out-of-sta	ate PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/06/2024	Wall, Lisa					\$30.00
		6 Contributor address; City; State; Zip Cod					
		Dallas, TX 75252					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Retired			Retired			
⊨	Date	Full name of contributor	ate PAC (ID# <sup>.</sup>	)		Amount of Contribution (\$)	
	04/04/2024	Ward, Susan				, and an e contribution (+)	\$200.00
	04/04/2024						¢200.00
		Contributor address; City; State; Zip Cod	e				
		Plano, TX 75023					
⊢	Dain air al a sau				Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor 🔲 out-of-sta	ate PAC (ID#:	)		Amount of Contribution (\$)	
	01/24/2024	Watling, Gregg					\$60.00
		Contributor address; City; State; Zip Cod					
		Allen, TX 75013					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired			Retired			
	Date	Full name of contributor out-of-sta	ate PAC (ID#:	)		Amount of Contribution (\$)	
	01/04/2024	Watling, Gregg					\$1,000.00
		Contributor address; City; State; Zip Cod					
			•				
		Allen, TX 75013					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<b></b> ;)		
	Retired			Retired			
⊨	Date	Full name of contributor out-of-sta	ate PAC (ID#:	)		Amount of Contribution (\$)	
	02/24/2024	Watling, Gregg					\$60.00
	02/24/2024						<b>\$00.00</b>
		Contributor address; City; State; Zip Cod	e				
		Allen TX 75012					
⊢	Drineinal	Allen, TX 75013	i		<u> </u>		
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired			Retired			

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 182/188 Rpt: 185/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	
4	Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7	Amount of Contribution (\$)	
	03/27/2024	Webb, Jamye				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Dringinal occu	McKinney, TX 75071	Employer (See Instructions	<u> </u>		
8	Principal occu Project Mana	ipation / Job title (See Instructions) ager	9 Employer (See Instructions Beyondsoft Consulting	5)		
⊢	-			<del></del>	t	
	Date 02/27/2024		D#:)		Amount of Contribution (\$)	¢25.00
	0212112024					\$25.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Project Mana		Beyondsoft Consulting			
⊨	Date	Full name of contributor out-of-state PAC (ID	D#:)		Amount of Contribution (\$)	
	04/27/2024	Webb, Jamye				\$25.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Project Mana		Beyondsoft Consulting	_		
	Date		D#:)		Amount of Contribution (\$)	
	01/27/2024	Webb, Jamye				\$25.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Project Mana		Beyondsoft Consulting	,		
╞	Date	Full name of contributor Out-of-state PAC (IE		Γ	Amount of Contribution (\$)	
	05/27/2024	Webb, Jamye				\$25.00
		Contributor address; City; State; Zip Code		1		
		McKinney, TX 75071				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Project Mana	ager	Beyondsoft Consulting			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 183/188 Rpt: 186/260
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Collin County Democratic Party	00054753
4 Date     5 Full name of contributor     out-of-state PAC (ID#:)       02/19/2024     Welch, Juley	<ul><li>7 Amount of Contribution (\$)</li><li>\$25.00</li></ul>
6 Contributor address; City; State; Zip Code	
Fairview, TX 75069	
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Retired       Retired	5)
Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/19/2024 Welch, Juley	\$25.00
Contributor address; City; State; Zip Code	
Fairview, TX 75069	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Retired       Retired	s)
Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/19/2024 Welch, Juley	\$25.00
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Fairview, TX 75069	
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:)	S) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Fairview, TX 75069 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired	s)
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley	S) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Fairview, TX 75069 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) 03/23/2024 Welch, Juley Contributor address; City; State; Zip Code Fairview, TX 75069	S) Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code	S) Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Principal occupation / Job title (See Instructions)         Retired         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$) \$23.00 \$) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         05/16/2024	s) Amount of Contribution (\$) \$23.00 (s)
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Principal occupation / Job title (See Instructions)         Retired         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:)	Amount of Contribution (\$) \$23.00 \$) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:)         05/16/2024	Amount of Contribution (\$) \$23.00 \$) Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         03/23/2024         Welch, Juley         Contributor address; City; State; Zip Code         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Fairview, TX 75069         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         out-of-state PAC (ID#:)         05/16/2024         Welch, Juley         Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$23.00 \$30 Amount of Contribution (\$) \$25.00

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 184/188 Rpt: 187/260
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00054753
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
03/23/2024	Welch, Juley		\$30.0
	6 Contributor address; City; State; Zip Code		1
	Fairview, TX 75069		
8 Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> \$)
Retired		Retired	, ,
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/19/2024	Welch, Juley		\$25.0
	Contributor address; City; State; Zip Code		•
	Fairview, TX 75069		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/19/2024	Welch, Juley		\$25.0
	Contributor address; City; State; Zip Code		
	Fairview, TX 75069		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/19/2024	Welch, Juley		\$25.0
	Contributor address; City; State; Zip Code		1
	Fairview, TX 75069		<u> </u>
	pation / Job title (See Instructions)	Employer (See Instructions	;)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/23/2024	White, Donald		\$20.0
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		Į
	Ipation / Job title (See Instructions)	Employer (See Instructions	
Cybersecurit	ly Engineer	TAMKO Building Produc	CTS

-						
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 185/188 Rpt: 188/260	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Collin Count	y Democratic Party			00054753	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	04/23/2024	White, Donald				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Plano, TX 75093				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	Cybersecurit	y Engineer	TAMKO Building Produc	cts		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/23/2024	White, Donald				\$20.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Cybersecurit	y Engineer	TAMKO Building Produc	cts		
	Date	Full name of contributor out-of-state PAC (ID#:_	·)	Γ	Amount of Contribution (\$)	
	02/23/2024	White, Donald				\$20.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Cybersecurit	ty Engineer	TAMKO Building Produc	cts		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/23/2024	White, Donald				\$20.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093	i			
		pation / Job title (See Instructions)	Employer (See Instructions			
	Cybersecurit	y Engineer	TAMKO Building Produc	cts		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/23/2024	White, Donald				\$20.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75093	i			
		pation / Job title (See Instructions)	Employer (See Instructions			
	Cybersecurit	y Engineer	TAMKO Building Produc	cts		

The Instruc	ction Guide explains how	v to complete this f	form	1.	1	Total pages Schedule A1: Sch: 186/188 Rpt: 189/260	
2 FILER NAME					3	Filer ID (Ethics Commission I	Filers)
	y Democratic Party					00054753	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_	:	)	7	Amount of Contribution (\$)	
05/30/2024	Wiles, John						\$34.00
	6 Contributor address; City; S	State; Zip Code					
		·····) [, · · · ·					
C. Dissipal acay	Mckinney, TX 75069	<u> </u>			Ĺ		
8 Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)		
Date	Full name of contributor	out-of-state PAC (ID#:_	:	)		Amount of Contribution (\$)	
02/22/2024	Wolf, James						\$25.00
	Contributor address; City; S						
	Plano, TX 75025						
Principal occu	pation / Job title (See Instructions	<i>c)</i>		Employer (See Instructions	<u> </u> נו		
	E DESIGNER	3)		CISCO	<i>''</i>		
Date	Full name of contributor	out-of-state PAC (ID#:_	:	)		Amount of Contribution (\$)	
01/22/2024	Wolf, James					\$25.00	
	Contributor address; City; S						
	Plano, TX 75025						
	pation / Job title (See Instructions	s)	Τı	Employer (See Instructions	5)		
SOFTWARE	EDESIGNER	I	(	CISCO			
Date	Full name of contributor	out-of-state PAC (ID#:	:	)		Amount of Contribution (\$)	
01/09/2024	Worst, Nancy		_				\$10.53
		State <sup>.</sup> Zin Code					
	Allen, TX 75002						
Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	<b></b> ;)		
Retired				Retired			
Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
02/09/2024	Worst, Nancy		·				\$10.53
0210312024							Φ10.00
	Contributor address; City; S	tate; Zip Code					
	Allen, TX 75002						
-	pation / Job title (See Instructions	S)		Employer (See Instructions	5)		
Retired		I		Retired			

The I	Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 187/188 Rpt: 190/260	
2 FILER	NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Party			00054753	, 
4 Date		5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
04/09	9/2024	Worst, Nancy				\$10.53
		6 Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Retire	ed		Retired			
Date		Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
05/09	9/2024	Worst, Nancy				\$10.53
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
Princip	pal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Retire	ed		Retired			
Date		Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
03/09	9/2024	Worst, Nancy				\$10.53
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Retire	ed		Retired			
Date		Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/09	9/2024	Worst, Nancy				\$10.53
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Retire	ed		Retired			
Date		Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
03/29	9/2024	Yedavalli, Sreedhar				\$15.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Math	Tutor		Self Employed			

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 188/188 Rpt: 191/260
2 FILER NAME Collin County Democratic Party	<b>3</b> Filer ID (Ethics Commission Filers) 00054753
01/18/2024 Zeb, Sumbel 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$179.86
Rockwall, TX 75032       8     Principal occupation / Job title (See Instructions)     9     Employer (See Instructions)       Director of Business Development     DBIA-SW	)
Date       Full name of contributor       out-of-state PAC (ID#:)         06/25/2024       Zimmerman, Cynthia         Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$30.00
Mckinney, TX 75070           Principal occupation / Job title (See Instructions)         Employer (See Instructions)	)
Retired Retired	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE	A2
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The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 192/260								
2 FILER NAME			3 Filer ID (Ethics Commission Filers)								
	ty Democratic Party		00054753								
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$								
5 Date 01/15/2024	<ul> <li>7 Contributor address; City; State; Zip Code</li> </ul>	)	8 Amount of 9 In-kind contribution contribution (\$) description \$250.00   Portrait, designer sunglasses & autographed book								
	McKinney, TX 75070		Check if travel outside of Texas. Complete Schedule T.								
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON									
Agency Lea		State Farm Insurar									
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)								
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)								
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)											
Date 01/15/2024	Full name of contributor out-of-state PAC (ID#: Sutka, Jeremy Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$220.00 I 2 FC Dallas Tickets, plus parking								
	McKinney, TX 75070		I Check if travel outside of Texas. Complete Schedule T.								
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON									
CEO		KJMB Solutions Inc	,								
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)								
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										
Date 01/24/2024	Full name of contributor out-of-state PAC (ID#: Tucker, Tiara Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$500.00   Exclusive Dallas Cowboys football signed by Super Bowl Champion Ed Jones & Autographed Picture								
	Carrollton, TX 75006		Check if travel outside of Texas. Complete Schedule T.								
Principal occu PR & Social	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Tiara PR Network									
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)								
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)								
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	ayme erhea pense xpens Vages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)			
-	Sch: 1/66 Rpt:	-	Collin County Democratic Party					00054753	(			
4	Date	5	Payee name									
-	03/20/2024	ľ	1-800-Flowers.com									
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de							
-	\$64.94		2 Jericho Plaza									
	<b>+00</b> .		Suite 200									
			Jericho, NY 11753									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description						
	OF EXPENDITURE		Gift/Awards/Memorials Expense					de of Texas. Com				
						Flowers for lo		officeholder living	) expense			
							133	or spouse				
_	Complete ONI V if direct		Condidate (Office la class a conse					Office h				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ignt			Office he	210			
	Date		Payee name									
	03/27/2024		1-800-Flowers.com									
	Amount (\$)		Payee address; City; State;	Zip Co	ode							
	\$72.51		2 Jericho Plaza									
	+		Suite 200									
			Jericho, NY 11753									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			alata Oshadula T			
	EXPENDITURE		Gift/Awards/Memorials Expense					de of Texas. Com officeholder living				
						Flowers for s		-				
							pot					
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office he	ald			
	expenditure to benefit C/OI				igin			Office In	siu			
_		1										
	Date		Payee name									
	01/05/2024		3 Kings Media House									
	Amount (\$)			Zip Co	ode							
	\$800.00		2001 Ross Ave									
			Dallas, TX 75201									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description						
	OF EXPENDITURE		Solicitation/Fundraising Expense					de of Texas. Com				
	EXPENDITORE							officeholder living				
						1/27/24 gala	eve	ent - photogr	apher			
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght			Office he	eld			
	expenditure to benefit C/OI	-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex nmittee Legal Services The Instruction Guid		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 2/66 Rpt:		Collin County Democratic Par	rty				00054753			
4	Date	5	Payee name								
	01/25/2024		3 Kings Media House								
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le					
	\$600.00		2001 Ross Ave								
			Dallas, TX 75201								
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Solicitation/Fundraising Expe		,		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITORE		5 .					, officeholder living expense			
						1/27/24 gala	eve	ent - photographer			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	(	Office sou	Jht		Office held			
	Date		Payee name								
	05/13/2024		APG&E								
	Amount (\$)		Payee address; City;	State	; Zip Co	le					
	\$105.47		6161 Savoy Drive	Olaio	, בוף כס						
	Φ105.47		-								
			Ste 500								
			Houston, TX 77036								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Office Overhead/Rental Expe		nedule)			tide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	(	Office sou	Jht		Office held			
	Date		Payee name								
	06/13/2024		APG&E								
	Amount (\$)		Payee address; City;	Stato	; Zip Co	10					
				Siale	, zip co						
	\$114.67		6161 Savoy Drive								
			Ste 500								
			Houston, TX 77036								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expe					ide of Texas. Complete Schedule T. , officeholder living expense			
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name	(	Office sou	uht		Office held			
	expenditure to benefit C/OI			(		jin					
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage B Gift/Awards/Men Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract	xpense Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME	=					3	Filer ID	(Ethics Commission Filers)
	Sch: 3/66 Rpt:			ity Democra	tic Party					00054753	``````````````````````````````````````
4	Date 01/18/2024	5	Payee name ActBlue Te:								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	le				
-	\$2.19		PO Box 44: Somerville,	1146		, <b>I</b>					
8	PURPOSE OF EXPENDITURE	(a)		ee Categories lista 'Fundraising	ed at the top of this sch Expense	edule)	Cheo	ck if travel o	, TX,	de of Texas. Com officeholder living	plete Schedule T. expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder nam	ie C	Office sou	ht			Office he	eld
	Date		Payee name								
	01/29/2024		ActBlue Te	xas							
	Amount (\$) \$1.87		Payee addre PO Box 44		State;	; Zip Co	le				
	DUDDOOF	(-)	Somerville,				(1-)				
	PURPOSE OF EXPENDITURE	(a)		ee Categories liste 'Fundraising	ed at the top of this sch Expense	iedule)	Cheo	ck if travel o	, TX,	de of Texas. Com officeholder living	plete Schedule T. I expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	iceholder nam	ie C	Office sou	lht			Office he	eld
	Date		Payee name								
	01/31/2024		ActBlue Te								
	Amount (\$) \$1.00		Payee addre PO Box 443		State	; Zip Co	le				
			Somerville,	MA 02144							
	PURPOSE OF EXPENDITURE	(a)		ee Categories liste Fundraising	ed at the top of this sch Expense	edule)	Cheo	ck if travel o	, TX,	de of Texas. Com officeholder living	plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder nam	ie C	Dffice sou	lht			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		F F G nmittee L	ivent Expense lees lood/Beverage Expen lift/Awards/Memorial egal Services <b>The Instruction G</b>	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract La	pense abor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					:	3	Filer ID	(Ethics Commission Filers)
	Sch: 4/66 Rpt:			/ Democratic I	Party					00054753	
4	Date 01/31/2024	5	Payee name ActBlue Texa	as							
6	Amount (\$)	7	Payee address	s; City;	State	; Zip Co	le				
	\$1.98		PO Box 4411 Somerville, N	46		·					
8	PURPOSE OF EXPENDITURE	(a)		Categories listed at undraising Ex		edule)		t if travel of travel of the second sec	TX,	le of Texas. Comp officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	Jht			Office he	ld
	Date		Payee name								
	02/14/2024		ActBlue Texa	as							
	Amount (\$)		Payee address	s; City;	State	; Zip Co	de				
	\$0.99		PO Box 4411 Somerville, N								
	PURPOSE OF EXPENDITURE	(a)		Categories listed at undraising Ex		edule)		t if travel of travel of the second	TX, (	le of Texas. Compofficeholder living	olete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	Jht			Office he	ld
	Date		Payee name								
	02/16/2024		ActBlue Texa	as							
	Amount (\$) \$3.59		Payee address PO Box 4411		State	; Zip Co	le				
			Somerville, N	IA 02144							
	PURPOSE OF EXPENDITURE	(a)		Categories listed at undraising Ex		edule)		t if travel of travel of the second sec	TX, (	le of Texas. Comp officeholder living	olete Schedule T. expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Dffice sou	Jht			Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/B Gift/Aw nmittee Legal S	Expense everage Expense ards/Memorials Expense ervices Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	erhead/F xpense xpense Vages/C	Reimbursement Rental Expense ontract Labor e this form.		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2		•		•		3	Filer ID	(Ethics Commission Filers)	
-	Sch: 5/66 Rpt:	-	Collin County De	mocratic Party					00054753	(	
4	Date 02/22/2024	5	Payee name ActBlue Texas								
6	Amount (\$) \$0.68	7	Payee address; PO Box 441146 Somerville, MA 0		e; Zip Co	ode					
8	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See Categ</sub> Solicitation/Fund	gories listed at the top of this s raising Expense	chedule)			TX,	de of Texas. Com officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	der name	Office sou	ight			Office he	ld	
	Date		Payee name								
	02/25/2024		ActBlue Texas								
	Amount (\$) \$4.96		Payee address; PO Box 441146 Somerville, MA 0		e; Zip Co	ode					
	PURPOSE OF EXPENDITURE	(a)		gories listed at the top of this s	chedule)			TX,	de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	der name	Office sou	ight			Office he	łld	
	Date		Payee name								
	03/06/2024		ActBlue Texas								
	Amount (\$) \$3.19		Payee address; PO Box 441146	City; Stat	e; Zip Co	ode					
			Somerville, MA 0	2144							
	PURPOSE OF EXPENDITURE	(a)	Category (See Cate Solicitation/Fund	gories listed at the top of this s raising Expense	chedule)			TX,	de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officehold	der name	Office sou	ight			Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense	Office Ove Polling Exp Printing Ex Salaries/W	rhead/l pense pense /ages/C	Reimbursement Rental Expense Contract Labor e this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FII FR NAME		•		•		3	Filer ID	(Ethics Commission Filers)	
-	Sch: 6/66 Rpt:	-		y Democratic P	Party					00054753		
4	Date 03/11/2024	5	Payee name ActBlue Tex	as								
6	Amount (\$) \$0.99	7	Payee addres PO Box 441 Somerville,	146	State	; Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)		e Categories listed at tt Fundraising Exp		iedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	əld	
	Date		Payee name									
	03/17/2024		ActBlue Tex	as								
	Amount (\$) \$0.40		Payee addres PO Box 441	146	State	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)		e Categories listed at th		iedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/24/2024		ActBlue Tex	as								
	Amount (\$) \$4.96		Payee addres PO Box 441		State	; Zip Co	de					
			Somerville,	MA 02144								
	PURPOSE OF EXPENDITURE	(a)		e Categories listed at tt Fundraising Exp	•	iedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	əld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	· · ·			3	Filer ID (Ethics Commission Filers)				
-	Sch: 7/66 Rpt:	-	Collin County Democratic Party				00054753				
4	Date 03/31/2024	5	Payee name ActBlue Texas								
6	Amount (\$) \$1.39	7	Payee address; City; State PO Box 441146 Somerville, MA 02144	; Zip Co	de						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held				
	Date		Payee name								
	04/07/2024		ActBlue Texas								
	Amount (\$) \$2.59		Payee address; City; State PO Box 441146 Somerville, MA 02144	; Zip Co	de						
	PURPOSE OF EXPENDITURE	(a)	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Solicitation/Fundraising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit card fees</li> </ul>								
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held				
	Date		Payee name								
	04/14/2024		ActBlue Texas								
	Amount (\$) \$1.39		Payee address; City; State PO Box 441146	; Zip Co	de						
			Somerville, MA 02144								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labo	se r	Transportation Travel in Distri Travel Out of I		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 8/66 Rpt:			ty Democrati	c Party				00054753	3	
4	Date 04/21/2024	5	Payee name ActBlue Tex	as							
6	Amount (\$)	7	Payee addres		Stato	; Zip Co	10				
0	\$1.98	,	PO Box 441 Somerville,	.146	State	, <b>Σι</b> ρ Cυ	16				
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising I	at the top of this sch Expense	nedule)		ravel outs	side of Texas. Co X, officeholder livi	omplete Schedule T. ing expense	
							Credit ca	rd fees	S		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	e (	ו Dffice sou	ght		Office	held	
	Date		Payee name								
	04/28/2024		ActBlue Tex	as							
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de				
	\$2.98		PO Box 441 Somerville,								
	PURPOSE OF EXPENDITURE	(a)	Category (Se		at the top of this sch Expense	nedule)		ravel outs Austin, TX	X, officeholder livi	omplete Schedule T. ing expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	e (	Office sou	jht		Office	held	
	Date		Payee name								
	05/08/2024		ActBlue Tex	as							
	Amount (\$) \$3.98		Payee addres PO Box 441		State	; Zip Co	de				
			Somerville,	MA 02144							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising I	at the top of this sch Expense	iedule)		ravel outs Austin, TX	X, officeholder livi	omplete Schedule T. ing expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	e (	Dffice sou	Jht		Office	held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	· · ·		•	3	Filer ID (Ethics Commission Filers)				
-	Sch: 9/66 Rpt:		Collin County Democratic Party				00054753				
4	Date 05/12/2024	5	Payee name ActBlue Texas								
6	Amount (\$) \$0.99	7	Payee address; City; State; PO Box 441146 Somerville, MA 02144	Zip Coo	le						
8	PURPOSE OF EXPENDITURE	(a)	<ul> <li>a) Category (See Categories listed at the top of this schedule)</li> <li>Solicitation/Fundraising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit card fees</li> </ul> </li> </ul>								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office souç	ht		Office held				
	Date		Payee name								
	05/19/2024		ActBlue Texas								
	Amount (\$) \$0.40		Payee address; City; State; PO Box 441146 Somerville, MA 02144	; Zip Coo	e						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice soug	ht		Office held				
	Date		Payee name								
	05/30/2024		ActBlue Texas								
	Amount (\$) \$5.95		Payee address; City; State; PO Box 441146	; Zip Coo	le						
			Somerville, MA 02144								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schu Solicitation/Fundraising Expense	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office soug	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	head/Ren ense pense ages/Cont			Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 10/66 Rpt:			ty Democratic	: Party					00054753	
4	Date 06/02/2024	5	Payee name ActBlue Tex	kas							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	le				
	\$2.78		PO Box 44: Somerville,	1146		, <b>I</b>					
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E		edule)			, TX,	le of Texas. Com officeholder living	plete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	(	Office sou	Jht			Office he	eld
	Date		Payee name								
	06/09/2024		ActBlue Tex	kas							
	Amount (\$) \$2.19		Payee addre PO Box 442		State	; Zip Co	le				
			Somerville,								
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E		iedule)			, TX,	le of Texas. Com officeholder living	plete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	(	Dffice sou	Iht			Office he	eld
	Date		Payee name								
	06/16/2024		ActBlue Tex	kas							
	Amount (\$) \$0.40		Payee addre PO Box 443		State	; Zip Co	le				
			Somerville,	MA 02144							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E		edule)			, TX,	le of Texas. Com officeholder living	plete Schedule T. g expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	(	Dffice sou	jht			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction	als Expense	Office Ove Polling Exp Printing Ex Salaries/W			Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 11/66 Rpt:			ty Democratic	Party				00054753	· · · · ·	
4	Date 06/23/2024	5	Payee name ActBlue Tex	kas							
6	Amount (\$) \$5.95	7	Payee addre PO Box 442 Somerville,	1146	State	; Zip Co	de				
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a Fundraising E		edule)		n, TX,	ide of Texas. Comp , officeholder living		
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght		Office he	ld	
	Date		Payee name								
	06/30/2024		ActBlue Tex	kas							
	Amount (\$) \$1.39		Payee addre PO Box 442 Somerville,	146	State	; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	Category (S	ee Categories listed a Fundraising E		edule)		n, TX,	ide of Texas. Comp , officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght		Office he	ld	
	Date		Payee name								
	01/05/2024		Amazon.co	m							
	Amount (\$) \$9.19		Payee addre 410 Terry A	-	State	; Zip Co	de				
			Seattle, WA	98109							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a head/Rental E		edule)		n, TX,	ide of Texas. Comp , officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Dffice sou	ght		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tran           Food/Beverage Expense         Polling Expense         Trav           y -         Gift/Awards/Memorials Expense         Printing Expense         Trav						Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 12/66 Rpt:		Collin County Democratic	Party				00054753			
4	Date	5	Payee name								
	01/10/2024		Amazon.com								
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le					
	\$11.88		410 Terry Ave North								
			Seattle, WA 98109								
8	PURPOSE OF	(a)	Category (See Categories listed a		edule)	b) Description					
	EXPENDITURE		Solicitation/Fundraising E	xpense				de of Texas. Comp officeholder living			
						1/27/24 gala					
						5					
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office he	ld		
	Date		Payee name								
	01/22/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	Zip Coo	le					
	\$103.84		410 Terry Ave North								
			Seattle, WA 98109								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed a Solicitation/Fundraising E		edule)		n, TX,	de of Texas. Comp officeholder living ent - decorati	expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice soug	ht		Office he	ld		
	Date		Payee name								
	01/23/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	Zip Coo	le					
	\$136.44		410 Terry Ave North								
			Seattle, WA 98109								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed a Solicitation/Fundraising E		edule)		n, TX,	de of Texas. Comp officeholder living ent - decorati	expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office he	ld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Trar           Food/Beverage Expense         Polling Expense         Trav           y -         Gift/Awards/Memorials Expense         Printing Expense         Trav						Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 13/66 Rpt:		Collin County	Democratic P	arty				00054753		
4	Date 01/24/2024	5	Payee name Amazon.com								
6	Amount (\$)	7	Pavee address	; City;	State	Zip Co	le				
,	\$43.24		410 Terry Ave Seattle, WA 9	e North	oluto,	, 210 000					
8	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sch	edule)	(b) Description				
	OF EXPENDITURE			undraising Exp		,	Check if travel	η, TX,	de of Texas. Com officeholder living ent - decorat	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	Jht		Office he	eld	
	Date		Payee name								
	01/25/2024		Amazon.com								
	Amount (\$)		Payee address	; City;	State;	; Zip Co	de				
	\$146.64		410 Terry Ave Seattle, WA 9								
	PURPOSE OF EXPENDITURE	(a)		Categories listed at th Indraising Exp		edule)		η, TX,	de of Texas. Com officeholder living ent - decorat	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	Jht		Office he	eld	
-	Date		Payee name								
	01/26/2024		Amazon.com								
	Amount (\$) \$62.14		Payee address 410 Terry Ave		State;	; Zip Coo	de				
			Seattle, WA 9	8109							
	PURPOSE OF EXPENDITURE	(a)		Categories listed at th undraising Exp		edule)		η, TX,	de of Texas. Com officeholder living ent - decorat	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Dffice sou	Jht		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Trans           Food/Beverage Expense         Polling Expense         Trave           y -         Gift/Awards/Memorials Expense         Printing Expense         Trave						Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission File	ers)
	Sch: 14/66 Rpt:		Collin Count	y Democratic	Party					00054753		
4	Date	5	Payee name									
	02/08/2024		Amazon.cor	n								
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de					
	\$97.41		410 Terry Av	ve North								
			Seattle, WA									
8	PURPOSE OF	(a)		e Categories listed a		edule)	(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental E	xpense					officeholder living	plete Schedule T.	
								Office supplie			(expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Dffice sou	ght			Office he	eld	
	Date		Payee name									
	02/09/2024		Amazon.cor	n								
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de					
	\$17.31		410 Terry Av	ve North								
			Seattle, WA	98109								
	PURPOSE	(a)	Category (Se	e Categories listed a	at the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental E	xpense					de of Texas. Com officeholder living	plete Schedule T.	
							J	Office supplie			expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/13/2024		Amazon.cor	n								
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de					
	\$182.94		410 Terry Av	ve North								
			Seattle, WA	98109								
	PURPOSE OF	(a)		e Categories listed a		edule)	(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental E	xpense						plete Schedule T.	
							I	Printer	, 17,	officeholder living	rexpense	
-	Complete ONLY if direct	L(	Candidate/Offic	ceholder name	(	Office sou	aht			Office he	əld	
	expenditure to benefit C/OI									2		
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Trans           Food/Beverage Expense         Polling Expense         Travel           -         Gift/Awards/Memorials Expense         Printing Expense         Travel						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 15/66 Rpt:		Collin County Democratic Pa	rty				00054753			
4	Date 03/15/2024		Payee name Amazon.com								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le					
	\$36.57		410 Terry Ave North Seattle, WA 98109								
8	PURPOSE	(a)	Category (See Categories listed at the	ton of this sch	edule)	(b) Description					
	OF EXPENDITURE		Event Expense		eddic)	Check if travel	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held			
	Date		Payee name								
	03/15/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	; Zip Co	le					
	\$20.02		410 Terry Ave North Seattle, WA 98109								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Event Expense	top of this sch	edule)		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held			
	Date		Payee name		_						
	03/15/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	; Zip Co	le					
	\$46.39		410 Terry Ave North								
			Seattle, WA 98109								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Event Expense	top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tran           Food/Beverage Expense         Polling Expense         Trav           / -         Gift/Awards/Memorials Expense         Printing Expense         Trav						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 16/66 Rpt:		Collin County Democratic Pa	arty				00054753			
4	Date 03/15/2024		Payee name Amazon.com								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de					
	\$74.67		410 Terry Ave North Seattle, WA 98109								
8	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Event Expense			Check if travel	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	03/15/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$55.41		410 Terry Ave North Seattle, WA 98109								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Event Expense	e top of this sch	edule)		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	03/18/2024		Amazon.com								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$73.50		410 Terry Ave North								
			Seattle, WA 98109		i						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at th Event Expense	e top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
ļ	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transportation Eq           Food/Beverage Expense         Polling Expense         Travel in District           / -         Gift/Awards/Memorials Expense         Printing Expense         Travel Out of District						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 17/66 Rpt:		Collin County Democratic Party					00054753		
4	Date	5	Payee name				1			
	03/21/2024		Amazon.com							
6	Amount (\$)	7	Payee address; City;	State; Z	Zip Cod	е				
	\$41.09		410 Terry Ave North							
			Seattle, WA 98109							
8	PURPOSE	(a)	Category (See Categories listed at the top o	6 4 h i =		b) Description				
Ĵ	OF	()	Event Expense	it this schedul	ie)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Convention s	sup	plies		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce soug	nt		Office held		
	Date		Payee name							
	01/17/2024		Arthur Murray Dance Studio							
	Amount (\$)		Payee address; City;	State; Z	Zip Cod	е				
	\$400.00		6526 LBJ Freeway							
			Dallas, TX 75240							
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedul	le) (	b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense	e e				ide of Texas. Complete Schedule T. , officeholder living expense		
								ent - decorations		
						1/21/24 guid	0.00			
	Complete ONLY if direct		Candidate/Officeholder name	Offic	ce soug	nt		Office held		
	expenditure to benefit C/OI	H			0					
-	Date		Payee name							
	04/22/2024		Atmos Energy							
	Amount (\$)		Payee address; City;	State; Z	7in Cod	<u>e</u>				
	\$90.63		PO Box 740353	01410, 1	p 000	-				
			Cincinnati, OH 45274							
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedul	le) (	b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	e				ide of Texas. Complete Schedule T.		
	-					Natural gas	η, TX,	, officeholder living expense		
						ivalui al yas				
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Offic	ce soug	nt		Office held		
	expenditure to benefit C/Oł			Sille						
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tra           Food/Beverage Expense         Polling Expense         Tra           / -         Gift/Awards/Memorials Expense         Printing Expense         Tra						Travel in District Travel Out of Dis	quipment & Related Expense		
-	Tatal pages Cabadula F1			explains now	to comp	nete this form.	1	Filer ID	(Ethico Commission Filoro)		
1	Total pages Schedule F1: Sch: 18/66 Rpt:		In County Democratic Party	ý			3	Filer ID 00054753	(Ethics Commission Filers)		
4	Date 05/22/2024		ee name los Energy								
6	Amount (\$)		ee address; City;	State; Zi	n Code						
Ū	\$83.64	PO	Box 740353 cinnati, OH 45274		p 0000						
						-					
8	PURPOSE OF EXPENDITURE		egory (See Categories listed at the to ce Overhead/Rental Expen		<sub>)</sub> (b			de of Texas. Com officeholder living			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	Office	e sough	t		Office he	eld		
	Date	Pay	ee name								
	06/28/2024	Atm	ios Energy								
	Amount (\$)	Pay	ee address; City;	State; Zi	p Code						
	\$83.64	-	Box 740353 cinnati, OH 45274								
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the to ce Overhead/Rental Expen		<sub>)</sub> (t			de of Texas. Com officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Cand	idate/Officeholder name	Office	e sough	t		Office he	eld		
	Date	Pav	ee name								
	01/17/2024		nperactive LLC								
	Amount (\$) \$2.02		ee address; City; 7 Burnet Road	State; Zi	p Code						
		Aus	tin, TX 78757								
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the to citation/Fundraising Expen:		) <b>(</b> b		n, TX,	de of Texas. Com officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF	Cand	idate/Officeholder name	Office	e sough	t		Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 19/66 Rpt:		Collin County Democratic Party				00054753				
4	Date 02/20/2024	5	Payee name Bumperactive LLC								
6	Amount (\$) \$1.26	7	Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Co	le						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held				
	Date		Payee name								
	02/26/2024		Bumperactive LLC								
	Amount (\$) \$67.97		Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Co	le						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held				
	Date		Payee name								
	02/26/2024		Bumperactive LLC								
	Amount (\$) \$70.55		Payee address; City; State; 5907 Burnet Road	Zip Co	le						
			Austin, TX 78757								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 20/66 Rpt:		Collin County Democratic Party				00054753				
4	Date 02/26/2024	5	Payee name Bumperactive LLC								
6	Amount (\$) \$41.57	7	Payee address; City; State 5907 Burnet Road Austin, TX 78757	; Zip Co	le						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ht		Office held				
	Date		Payee name								
	03/08/2024		Bumperactive LLC								
	Amount (\$) \$1.55		Payee address; City; State 5907 Burnet Road Austin, TX 78757	; Zip Co	le						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ht		Office held				
	Date		Payee name								
	03/19/2024		Bumperactive LLC								
	Amount (\$) \$4.50		Payee address; City; State 5907 Burnet Road	; Zip Co	le						
			Austin, TX 78757								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Solicitation/Fundraising Expense	nedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transport           Food/Beverage Expense         Polling Expense         Travel in           / -         Gift/Awards/Memorials Expense         Printing Expense         Travel ou						Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 21/66 Rpt:			ty Democratic	Party				00054753		
4	Date 03/20/2024		Payee name Bumperactiv	ve LLC							
6	Amount (\$) \$4.17		Payee addres 5907 Burne Austin, TX 7	t Road	State	; Zip Co	de				
8	PURPOSE OF EXPENDITURE			ee Categories listed a Fundraising E		nedule)		in, TX,	ide of Texas. Com , officeholder livinç		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Office sou	ght		Office he	eld	
	Date		Payee name								
	03/25/2024		Bumperactiv	ve LLC							
	Amount (\$) \$3.98		Payee addres 5907 Burne Austin, TX 7	t Road	State	; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	Category (Se	ee Categories listed a Fundraising E		nedule)		in, TX,	ide of Texas. Com , officeholder livinç		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Office sou	ght		Office he	eld	
	Date		Payee name								
	03/25/2024		Bumperactiv	ve LLC							
	Amount (\$) \$94.84		Payee addres 5907 Burne		State	; Zip Co	de				
			Austin, TX 7	78757							
	PURPOSE OF EXPENDITURE			ee Categories listed a Fundraising E		nedule)		in, TX,	ide of Texas. Com , officeholder livinç		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Dffice sou	ght		Office he	əld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 22/66 Rpt:		Collin County Democratic Party				00054753				
4	Date 03/27/2024	5	Payee name Bumperactive LLC								
6	Amount (\$) \$9.12	7	Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Coo	le						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held				
	Date		Payee name								
	04/03/2024		Bumperactive LLC								
	Amount (\$) \$1.66		Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Coo	le						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held				
	Date		Payee name								
	04/10/2024		Bumperactive LLC								
	Amount (\$) \$4.54		Payee address; City; State; 5907 Burnet Road	Zip Co	le						
			Austin, TX 78757								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transport           Food/Beverage Expense         Polling Expense         Travel in I           / -         Gift/Awards/Memorials Expense         Printing Expense         Travel Ou						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 23/66 Rpt:		Collin County Democratic Party					00054753			
4	Date	5	Payee name								
	04/22/2024		Bumperactive LLC								
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip (	Code						
	\$2.66		5907 Burnet Road								
			Austin, TX 78757								
8	PURPOSE	(a)	Category (See Categories listed at the top of this		(b)	Description					
Ũ	OF	(~)	Solicitation/Fundraising Expense	schedule)	(~)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE							, officeholder living expense			
						Merchandise					
9	Complete ONLY if direct		Candidate/Officeholder name	Office s	ought			Office held			
	expenditure to benefit C/OI	-1									
	Date		Payee name								
	04/26/2024		Bumperactive LLC								
	Amount (\$)		Payee address; City; Sta	ate; Zip (	Code						
	\$598.36		5907 Burnet Road	, <u>-</u>							
	\$550.50		SSOT Buillet Road								
			Austin, TX 78757								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Solicitation/Fundraising Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Merchandise					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ought			Office held			
	Date		Payee name								
	05/10/2024		Bumperactive LLC								
	Amount (\$)		Payee address; City; Sta	ate; Zip (	Code						
	\$1.49		5907 Burnet Road								
			Austin, TX 78757								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF		Solicitation/Fundraising Expense	,		Check if travel	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		<b>5</b> .			Check if Austin	ı, ТХ,	, officeholder living expense			
						Merchandise					
	Complete ONLY if direct		Candidate/Officeholder name	Office s	ought			Office held			
	expenditure to benefit C/OI	1									

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense L Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME 3				Filer ID (Ethics Commission Filers)	
	Sch: 24/66 Rpt:		Collin County Democratic Party					00054753
4	Date 05/29/2024	5 Payee name Bumperactive LLC						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$1.46	5907 Burnet Road Austin, TX 78757						
8	PURPOSE OF EXPENDITURE	OF Solicitation/Fundraising Expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held
	Date		Payee name					
05/29/2024			Bumperactive LLC					
Amount (\$) Payee address; City; State; Zip Code								
	\$128.58		5907 Burnet Road Austin, TX 78757					
PURPOSE OF EXPENDITURE		(a)					de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held
	Date		Payee name					
	06/03/2024		Bumperactive LLC					
Amount (\$)     Payee address;     City;     State;     Zip Code       \$12.72     5907 Burnet Road								
Austin, TX 78757								
PURPOSE OF EXPENDITURE		(a)	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense jense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	· · · ·		•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 25/66 Rpt:		Collin County Democratic Party			ľ	00054753			
4	Date 06/05/2024	5	Payee name Bumperactive LLC							
6 Amount (\$) 7 Payee address; City; State; Zip Code \$5.08 5907 Burnet Road Austin, TX 78757										
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense         Image: Merchandise       Merchandise										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held			
	Date		Payee name							
	06/10/2024		Bumperactive LLC							
	Amount (\$) \$1.49		Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office held						
	Date		Payee name							
	06/17/2024		Bumperactive LLC							
	Amount (\$) \$138.34		Payee address; City; State; 5907 Burnet Road	Zip Coo	le					
			Austin, TX 78757							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense plies			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held			

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 26/66 Rpt:		Collin County Democratic Party 00054753							
4	Date 06/18/2024	5 Payee name Bumperactive LLC								
6 Amount (\$)       7 Payee address; City; State; Zip Code         \$2.66       5907 Burnet Road         Austin, TX 78757										
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this school Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held			
	Date		Payee name							
	06/20/2024		Bumperactive LLC							
	Amount (\$) \$2.42		Payee address; City; State; 5907 Burnet Road Austin, TX 78757	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held			
	Date		Payee name							
	06/26/2024		Bumperactive LLC							
	Amount (\$) \$2.54		Payee address; City; State; 5907 Burnet Road	Zip Co	le					
			Austin, TX 78757							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex	pense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2 FILE		-		-	3	Filer ID	(Ethics Commission Filers)		
	Sch: 27/66 Rpt:		in County Democratic Pa	00054753							
4	Date	5 Pay	Payee name								
	03/06/2024	Cafe Gecko									
6	Amount (\$)     7 Payee address;     City;     State;     Zip Code       \$150.00     239 Town Plaza										
Fairview, TX 75069											
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Food       Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Food											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	C	Office sou	ht		Office he	ld		
	Date	Pay	ee name								
	03/26/2024	Car	va								
	Amount (\$) \$12.95	214	ee address; City; 0 S Dupont Highway nden, DE 19934	State;	; Zip Coo	le					
	PURPOSE OF EXPENDITURE	<b>(a)</b> Cate	gory (See Categories listed at the ce Overhead/Rental Expe		edule)			ide of Texas. Comp , officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought					Office he	ld			
	Date	Pay	ee name								
	04/26/2024	Car	va								
	Amount (\$) \$12.95		ee address; City; 0 S Dupont Highway	State;	; Zip Coo	le					
Camden, DE 19934											
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the ce Overhead/Rental Expe		edule)			ide of Texas. Com , officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		date/Officeholder name	C	Dffice soug	ht		Office he	ld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide expla		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 28/66 Rpt:		Collin County Democratic Party					00054753		
4	Date 05/28/2024	5	Payee name Canva							
6 Amount (\$) \$12.95 7 Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934										
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of thi Office Overhead/Rental Expense	s sched	dule)		in, TX	ide of Texas. Com , officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Of	fice souç	ıht		Office he	ld	
	Date		Payee name							
	06/26/2024		Canva							
	Amount (\$) \$12.95		Payee address; City; S 2140 S Dupont Highway Camden, DE 19934	tate;	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of thi Office Overhead/Rental Expense	s sched	dule)		in, TX	ide of Texas. Com		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	fice soug	Jht		Office he	łd	
	Date		Payee name							
	02/20/2024		Chevalier, M Melanie							
	Amount (\$) \$100.00		Payee address; City; S 7805 Racheal CT	tate;	Zip Coo	le				
			Plano, TX 75024							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of thi Return of Contribution	s sched	dule)		in, TX	ide of Texas. Com , officeholder living ibution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	fice souç	jht		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Imittee Legal Services The Instruction (	ls Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 29/66 Rpt:		Collin County Democratic Party 00054753							
4	Date 03/20/2024	/2024 5 Payee name Chevalier, M Melanie								
6				Stata	· Zin Co					
\$100.00 7805 Racheal CT										
			Plano, TX 75024							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed a Return of Contribution	t the top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense bution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held		
	Date		Payee name							
	04/16/2024		Collin College							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$260.00		2800 E Spring Creek Park Plano, TX 75074	way						
	PURPOSE OF EXPENDITURE		Category <sub>(See Categories listed a</sub> Office Overhead/Rental E:		iedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense IOMS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held		
	Date		Payee name							
	05/09/2024		Collin College							
	Amount (\$) \$605.00		Payee address; City; 2800 E Spring Creek Park		; Zip Co	de				
			Plano, TX 75074							
	PURPOSE OF EXPENDITURE		Category (See Categories listed a Office Overhead/Rental E		edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense IOMS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 30/66 Rpt:	Collin County Democratic Party	00054753						
4	Date 05/09/2024	Payee name Collin College							
6 Amount (\$)       7 Payee address; City; State; Zip Code         \$1,210.00       2800 E Spring Creek Parkway         Plano, TX 75074									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense CEC meeting rooms									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/16/2024	Collin County Noir, LLC							
	Amount (\$) \$1,695.00	Payee address; City; State; Zip Code 3901 San Mateo Drive Plano, TX 75023							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T. , TX, officeholder living expense 2 <b>S</b>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/18/2024	Collin Cty Dem Party Primary							
	Amount (\$) \$7,302.56	Payee address; City; State; Zip Code 6829 K Ave Ste 111 Plano, TX 75074							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense al for primary and runoff elections						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Re head/Re ense pense ages/Cor	eimbursement ntal Expense ntract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 31/66 Rpt:		Collin County Democratic Party					00054753		
1	Date	5	Payee name							
7	03/31/2024	ľ	Collin Cty Dem Party Primary							
6		7		Zin Co	10					
6	Amount (\$) \$42.33	7	Payee address; City; State; 6829 K Ave	Zip Co	le					
	\$42.33									
			Ste 111							
			Plano, TX 75074							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) De	scription				
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Com		
								officeholder living	nd runoff elections	
					10	ty unterentia		or primary a		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	jht			Office he	eld	
	Date		Payee name							
	04/29/2024		Collin Cty Dem Party Primary							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$0.01		6829 K Ave							
			Ste 111							
			Plano, TX 75074							
_	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) De	escription				
	OF		Salaries/Wages/Contract Labor	euule)			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin,	expense			
					Pa	ay differentia	al f	or primary a	nd runoff elections	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	jht			Office he	eld	
	expenditure to benefit e/or									
	Date		Payee name							
	05/31/2024		Collin Cty Dem Party Primary							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$372.93		6829 K Ave							
			Ste 111							
			Plano, TX 75074							
-	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) De	escription				
	OF		Salaries/Wages/Contract Labor	edule)	(, D.) []		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin,	тx,	officeholder living	expense	
					Pa	ay differentia	al f	or primary a	nd runoff elections	
	Complete ONLY if direct		Candidate/Officeholder name C	office sou	ht			Office he	eld	
	expenditure to benefit C/OI	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Travel Out of District						n Equipment & Related Expense ict District		
1	Total pages Schedule F1:	2	FILER NAME				3	3 Filer ID	(Ethics Commission Filers)	
-	Sch: 32/66 Rpt:	-	Collin County Democratic Party				[	00054753	. ,	
-	· · · · · ·	_							,	
4	Date	5	Payee name							
	04/10/2024		Constant Contact Inc.							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de				
	\$241.98		1601 Trapelo Road							
			Suite 329							
			Waltham, MA 02451							
8	PURPOSE	(2)			r	(b) Descriptio				
ľ	OF	(4)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this sche	dule)	· _ '		utside of Texas. Co	omplete Schedule T.	
	EXPENDITURE		Once Overneau/Nentai Expense					TX, officeholder liv	•	
						Commun	nicatio	ons		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	0	ffice sou	yht		Office	held	
	Date		Payee name							
	05/10/2024		Constant Contact Inc.							
_	Amount (\$)		Payee address; City;	State:	Zip Co	de				
	\$241.98		1601 Trapelo Road		·					
	\$ <u>2</u> 11100		Suite 329							
			Waltham, MA 02451							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	this sche	dule)	(b) Descriptio				
	EXPENDITURE		Office Overhead/Rental Expense					utside of Texas. Co TX, officeholder livi	omplete Schedule T.	
						Commun				
						Commun	noutio	110		
_	Complete ONLY if direct		Candidate/Officeholder name	0	ffice sou	ht.		Office	bold	
	expenditure to benefit C/OF		candidate/Officeholder frame	0	nice sou	Ju		Office	neiu	
	Date		Payee name							
	06/10/2024		Constant Contact Inc.							
	Amount (\$)		Payee address; City;	State;	Zip Co	de				
	\$241.98		1601 Trapelo Road							
			Suite 329							
			Waltham, MA 02451							
	PURPOSE	(-)				(h) p : .:.				
	OF	(a)	Category (See Categories listed at the top of	this sche	dule)	(b) Descriptio Check if:		Itside of Texas Co	omplete Schedule T.	
	EXPENDITURE		Office Overhead/Rental Expense					TX, officeholder livi		
						Commun			<b>3</b> • <b>1</b> • • •	
-	Complete ONLY if direct	Ļ	Candidate/Officeholder name	0	ffice sou	nht		Office	held	
	expenditure to benefit C/OI			0	300	j		Onice	nora	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 33/66 Rpt:	Collin County Democratic Party	00054753						
4	Date 01/23/2024	5 Payee name Crown Awards							
6	Amount (\$)	Payee address; City; State; Zip Code							
\$530.31 9 Skyline Drive									
		Hawthorne, NY 10532							
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if travel outside of Texas. Complete Schedule T.         Image: Check if Austin, TX, officeholder living expense       1/27/24 gala event - decorations									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/22/2024	Dollar Tree							
	Amount (\$) \$83.60	Payee address; City; State; Zip Code 2404 K Avenue Plano, TX 75074							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Supplies						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH							
	Date	Payee name							
	02/14/2024	Dominos							
	Amount (\$) \$62.94	Payee address; City; State; Zip Code 3509 E Park Blvd No.170 Plano, TX 75074							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense event - post meeting food						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen nmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e Contract Labor		Travel in District Travel Out of Distri	uipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 34/66 Rpt:		Collin County Democratic Party							
4	Date 03/19/2024	5	Payee name Ehrenreich, Eric							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$450.00		2200 Taylor-Burk Drive							
McKinney, TX 75071										
8	PURPOSE	(a)	_			(h)	Description			
0	OF	(a)	Category (See Categories listed at the to Event Expense	p of this sch	iedule)	(0)		outsi	de of Texas. Comple	ete Schedule T.
	EXPENDITURE		Event Expense						officeholder living e	
							Convention s	есι	ırity	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	(	Dffice sou	ght			Office held	d
	Date		Payee name							
	02/20/2024		FormSwift							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$5.91		27 W Anapamu Street		· •					
			Suite 355							
			Santa Barbara, CA 93101							
	PURPOSE OF	(a)	Category (See Categories listed at the to		nedule)	(b)	Description	outoi	de of Texas. Comple	ata Cabadula T
	EXPENDITURE		Office Overhead/Rental Expen	se					officeholder living e	
							W2 software	,,		
	Complete ONLY if direct		Candidate/Officeholder name	(	Dffice sou	ght			Office held	d
	expenditure to benefit C/OF	H								
	Date		Payee name							
	02/20/2024		FormSwift							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$1.95		27 W Anapamu Street	Claro	, <u>_</u> .p ee					
	<b>\$1.00</b>		Suite 355							
			Santa Barbara, CA 93101							
	PURPOSE OF	(a)	Category (See Categories listed at the to		nedule)	(b)	Description			
	EXPENDITURE		Office Overhead/Rental Expen	se					de of Texas. Comple	
							W2 software	, 17,	officeholder living e	expense
							JAC JOILWAIC			
_		Ļ	Condidate/Officeholder		Office com	abt			Office hel	d
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Ĺ	Office sou	ynt			Office held	u

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/M	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 35/66 Rpt:		Collin County Democratic Party				00054753			
4	Date 02/20/2024	5	Payee name FormSwift							
6	Amount (\$) \$5.91									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense W2 software										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name (	Office sou	ght		Office held			
	Date		Payee name							
	02/20/2024		FormSwift							
	Amount (\$) \$5.91		Payee address; City; State 27 W Anapamu Street Suite 355 Santa Barbara, CA 93101	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	iedule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name (	Office sou	ght		Office held			
	Date		Payee name							
	02/23/2024		FormSwift							
	Amount (\$) \$37.00		Payee address; City; State 27 W Anapamu Street Suite 355 Santa Barbara, CA 93101	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	iedule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name (	Office sou	ght		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 36/66 Rpt:		Collin County Democratic Party 00054753							
4	Date	5	Payee name							
	04/26/2024		FormSwift							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$37.00		27 W Anapamu Street							
			Suite 355							
Santa Barbara, CA 93101										
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description					
	OF		Office Overhead/Rental Expense	euule)		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		•			, тх,	officeholder living expense			
					W2 software					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	jht		Office held			
	Date		Payee name							
	04/29/2024		FormSwift							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$11.81		27 W Anapamu Street							
			Suite 355							
			Santa Barbara, CA 93101							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense	,	Check if travel	outsi	de of Texas. Complete Schedule T.			
						, TX,	officeholder living expense			
		W2 software					3			
	Complete ONIL V if direct					Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name C	office sou	JIIL		Onice field			
		_								
	Date 06/21/2024		Payee name Frisco Democrats PAC							
	Amount (\$)			Zip Co	de					
	\$250.00		13449 Grayhawk Bld							
			Frisco, TX 75033							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Solicitation/Fundraising Expense				de of Texas. Complete Schedule T. officeholder living expense			
							ch party location			
-	Complete ONLY if direct	L(	Candidate/Officeholder name C	office sou	jht		Office held			
	expenditure to benefit C/OI	4		·						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	erhead/ kpense xpense Vages/C	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 37/66 Rpt:		Collin County Democratic Party					00054753		
4	Date	5	Payee name							
	05/06/2024		Frontier							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode					
	\$133.76		PO Box 74047							
			Cincinnati, OH 45274							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,		-	outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE							officeholder living expense		
						nternet servi	се			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held		
	Date	<u> </u>								
	06/03/2024		Payee name Frontier							
		<u> </u>								
	Amount (\$)			e; Zip Co	bde					
	\$133.76		PO Box 74047							
			Cincinnati, OH 45274							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b) [	Description				
	EXPENDITURE		Office Overhead/Rental Expense		ļļ			de of Texas. Complete Schedule T. , officeholder living expense		
						Internet servi				
							00			
	Complete ONLY if direct		andidate/Officeholder name	Office sou	l Ight			Office held		
	expenditure to benefit C/OF				5					
-	Date		Payee name							
	01/03/2024		Get A Bid Auctions							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$5.00		PO Box 859	· ·						
			Hallettsville, TX 77964							
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b) [	Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense	-				de of Texas. Complete Schedule T.		
								officeholder living expense		
					-	1/27/24 gala (	eve	ent - auction software		
	Complete ONU V if direct	L	andidata/Officabalder serve	Office	abt.			Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ignt			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Gift/Award	erage Expense s/Memorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 38/66 Rpt:		Collin County Dem	ocratic Party				00054753	. ,	
4	Date	5	Payee name							
	02/05/2024		Get A Bid Auctions							
6	Amount (\$)	7	Payee address; 0	City; State;	; Zip Co	de				
	\$5.00		PO Box 859							
			Hallettsville, TX 77	964						
_	DUDDOCE					(1-)				
8	PURPOSE OF	(a)		es listed at the top of this sch	nedule)	(b) Description	outei	ide of Texas. Comple	ato Schodulo T	
	EXPENDITURE		Solicitation/Fundra	sing Expense				, officeholder living e		
								ent - auction s		
						_,_,,_ , gala				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholde	r name C	] Office sou	ght		Office held	1	
	Date		Payee name							
	06/20/2024		GoDaddy							
		-	-	Ctoto	. 7:0 00	al a				
	Amount (\$)				; Zip Co	ae				
	\$57.96		14455 N Hayden R	d						
			Ste 226							
			Scottsdale, AZ 852	60						
	PURPOSE	(a)	Category (See Categori	es listed at the top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Office Overhead/R		,	Check if travel	outsi	ide of Texas. Comple	ete Schedule T.	
	EXPENDITORE			·		Check if Austir	ι, TX,	, officeholder living e	xpense	
						Domain nam	e re	egistration		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholde	r name C	Office sou	ght		Office held	1	
-	Date									
	06/26/2024		Payee name GoDaddy							
	Amount (\$)		-	•	; Zip Co	de				
	\$168.64		14455 N Hayden R	d						
			Ste 226							
			Scottsdale, AZ 852	60						
	PURPOSE	(a)	Category (See Category	es listed at the top of this sch	nedule)	(b) Description				
	OF		Office Overhead/R		iouulo)		outsi	ide of Texas. Comple	ete Schedule T.	
	EXPENDITURE					Check if Austir	η, TX,	, officeholder living e	xpense	
						Domain nam	e re	egistration		
	Complete ONLY if direct		Candidate/Officeholde	r name C	Office sou	ght		Office held	t	
	expenditure to benefit C/OI	Н								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wage:	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 39/66 Rpt:		Collin County Democratic Party					00054753		
4	Date	5	Payee name							
	06/26/2024		GoDaddy							
6	Amount (\$)	7	Payee address; City; S	tate; Zip C	ode					
	\$76.32		14455 N Hayden Rd							
			Ste 226							
			Scottsdale, AZ 85260							
8	PURPOSE	(a)	Category (See Categories listed at the top of th	ia ashadula)	(b)	Description				
-	OF		Office Overhead/Rental Expense	is schedule)	(-)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense		
						Domain nam	e re	egistration		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held		
	Date		Payee name							
	06/26/2024		GoDaddy							
	Amount (\$)		Payee address; City; S	tate; Zip C	ode					
	\$70.32		14455 N Hayden Rd							
			Ste 226							
			Scottsdale, AZ 85260							
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense				outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE							officeholder living expense		
						Domain name	e re	egistration		
				015				0111111		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held		
	_	-								
	Date		Payee name							
	04/02/2024		Google LLC							
	Amount (\$)			tate; Zip C	ode					
	\$46.05		1600 Amphitheatre Pkwy							
			Mountain View, CA 94043		-					
	PURPOSE OF	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T. officeholder living expense		
						Google Work				
						-	-			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held		
	expenditure to benefit C/OF	H								

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 40/66 Rpt:	Collin County Democratic Party	00054753
4	Date 05/02/2024	Payee name Google LLC	
6	Amount (\$) \$42.47	<sup>7</sup> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense SPACE
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/03/2024	Google LLC	
	Amount (\$) \$30.70	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense SPACE
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/25/2024	HEB	
	Amount (\$) \$18.47	Payee address; City; State; Zip Code 575 E Exchange Pkwy	
		Allen, TX 75002	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for office
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense         Polling Expense         Travel in District           -         Gift/Awards/Memorials Expense         Printing Expense         Travel Out of District						quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 41/66 Rpt:			/ Democratic Pa	arty				00054753	
4	Date 05/30/2024	5	Payee name HEB							
6	Amount (\$)	7	Payee address	s; City;	State	; Zip Co	de			
	\$53.90		575 E Excha Allen, TX 750	nge Pkwy		·				
8	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See</sub> Food/Bevera	Categories listed at the ge Expense	e top of this sch	edule)		stin, TX	side of Texas. Com c, officeholder living <b>e</b>	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	(	Office sou	ght		Office h	eld
	Date		Payee name							
	04/10/2024		Hootsuite Inc							
	Amount (\$)		Payee address	s; City;	State	; Zip Co	de			
	\$1,266.40		111 East 5th Vancouver B	Avenue C V5T4L1 Can	ada					
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See</sub> Consulting E	Categories listed at the XPENSE	e top of this sch	edule)		stin, TX	side of Texas. Com (, officeholder living g Tool	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	ght		Office h	eld
	Date		Payee name							
	01/18/2024		Intuit Inc.							
	Amount (\$) \$52.77		Payee address 2800 E. Com	s; City; Imerce Center F		; Zip Co	de			
			Tucson, AZ 8	35706						
	PURPOSE OF EXPENDITURE	(a)	Category (See Accounting/E	Categories listed at the Banking	e top of this sch	edule)		stin, TX	side of Texas. Com (, officeholder living <b>line</b>	
ļ	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	(	Dffice sou	ght		Office h	əld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)			
	Sch: 42/66 Rpt:		Collin County Democratic Party				00054753			
4	Date 02/20/2024	5	Payee name Intuit Inc.							
6	Amount (\$) \$78.85	7	Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Coo	le					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense ine			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office souç	ht		Office held			
	Date		Payee name							
	03/18/2024		Intuit Inc.							
	Amount (\$) \$71.96		Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Coo	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense ine			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	03/18/2024		Intuit Inc.							
	Amount (\$) \$92.74		Payee address; City; State; 2800 E. Commerce Center Place	Zip Coo	le					
			Tucson, AZ 85706							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense ine			
ļ	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains F	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)			
	Sch: 43/66 Rpt:		Collin County Democratic Party				00054753			
4	Date 04/18/2024	5	Payee name Intuit Inc.							
6	Amount (\$) \$92.74	7	Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Co	le					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense line			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held			
	Date		Payee name							
	04/18/2024		Intuit Inc.							
	Amount (\$) \$71.96		Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Coo	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense line			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held			
	Date		Payee name							
	05/20/2024		Intuit Inc.							
	Amount (\$) \$71.96		Payee address;City;State;2800 E. Commerce Center Place	Zip Co	le					
			Tucson, AZ 85706							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense line			
ļ	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	3	Filer ID (Ethics Commission Filers)					
	Sch: 44/66 Rpt:		Collin County Democratic Party				00054753			
4	Date 05/20/2024	5	Payee name Intuit Inc.							
6	Amount (\$) \$92.74	7	Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Co	le					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense I <b>ine</b>			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held			
	Date		Payee name			_				
	06/18/2024		Intuit Inc.							
	Amount (\$) \$92.74		Payee address; City; State; 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense line			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held			
	Date		Payee name							
	06/18/2024		Intuit Inc.							
	Amount (\$) \$71.96		Payee address;City;State;2800 E. Commerce Center Place	Zip Coo	le					
			Tucson, AZ 85706							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense line			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Dffice sou	ht		Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a	)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contrac The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)
-	Sch: 45/66 Rpt:	Collin County Democratic Party	00054753
4	Date 03/25/2024	Payee name Jasons Deli	
6	Amount (\$) \$1,750.00	Payee address; City; State; Zip Code 925 N Central Expwy	
	\$1,750.00	Plano, TX 75075	
8	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense rention food
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/23/2024	Kell, Robert	
	Amount (\$) \$480.00	Payee address; City; State; Zip Code 2200 Taylor-Burk Dr.	
		McKinney, TX 75071	
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense 24 gala event - security
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held
-	Date	Payee name	
	01/08/2024	Knue Swag Entertainment	
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 2370 Justin Rd	
		Highland Village, TX 75077	
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense 24 gala event - decorations
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Services	Expense morials Expense ion Guide explains	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 46/66 Rpt:		Collin County Democra	atic Party				00054753		
4	Date	5	Payee name							
	01/26/2024		Knue Swag Entertainn	nent						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$774.25		2370 Justin Rd							
			Highland Village, TX 7	5077						
8	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sch	iedule)	<b>b)</b> Description				
	OF EXPENDITURE		Solicitation/Fundraisin		,			ide of Texas. Comp		
	EXPENDITORE							, officeholder living		
						1/27/24 gala	eve	ent - decorati	ions	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder na	ne C	Office soug	ht		Office he	ld	
	Date		Payee name							
	06/28/2024		Legacy Plano Master I	LC						
-	Amount (\$)		Payee address; City;	State:	; Zip Coo	le				
	\$2,811.16		PO Box 803289	,	, 1					
	+=,0====0									
			Dallas, TX 75380							
	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sch	nedule)	<b>b)</b> Description				
	OF EXPENDITURE		Office Overhead/Renta	al Expense				ide of Texas. Comp		
						Lease payme		, officeholder living	expense	
						Lease paying	ent			
	Complete ONLY if direct		Candidate/Officeholder na	<b>(</b>	Office soug	ht		Office he	ld	
	expenditure to benefit C/OI				Jince Soug	in the second seco		Onice ne	au	
	Date	<u> </u>	Payee name							
	01/23/2024		Marchand, Joseph							
			-	Stata	· Zin Cor					
	Amount (\$) \$480.00		Payee address; City;		; Zip Coo	le				
	Φ400.00		2200 Taylor-Burk Drive	5						
			McKinney, TX 75071							
	PURPOSE	(a)	Category (See Categories lis	ted at the top of this cab	aluba	<b>b)</b> Description				
	OF		Solicitation/Fundraisin		ieuuie)		outs	ide of Texas. Comp	plete Schedule T.	
	EXPENDITURE			<u>y _,,poneo</u>		Check if Austir	n, TX	, officeholder living	expense	
						1/27/24 gala	eve	ent - security		
	Complete ONLY if direct		andidate/Officeholder na	ne C	Office soug	ht		Office he	ld	
	expenditure to benefit C/OI	Н								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Relate       Food/Beverage Expense     Polling Expense     Travel in District       -     Gift/Awards/Memorials Expense     Printing Expense     Travel Out of District						quipment & Related Expense	
1	Total pages Schedule F1:	2						2	Filer ID	(Ethics Commission Filers)
1		۲ <u> </u>		Domooratio Da				ľ		
	Sch: 47/66 Rpt:			Democratic Pa	irty				00054753	
4	Date	5	Payee name							
	03/19/2024		McKinney ISI	C						
6	Amount (\$)	7	Payee address	; City;	State	; Zip Co	de			
-	\$8,360.00	[ .	McKinney ISI			,				
	\$0,000.00									
			4201 S. Hard	in Biva.						
			McKinney, TX	K 75070						
8	PURPOSE	(a)	Category (See	Categories listed at the	ton of this sch	(aluba	(b) Description			
	OF		Event Expens			icuaic)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE						Check if Austir	n, TX	, officeholder living	) expense
							Convention I	оса	tion	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Office	eholder name	(	Dffice sou	ght		Office he	eld
	Date		Payee name							
	06/01/2024		McKinney Pri	de						
_	Amount (\$)	-	Payee address	; City;	State	; Zip Co	de			
	\$500.00		500 Singletor	-	Otato	, <u>Lip</u> 00				
	\$500.00			I DIVU						
			Apt 2293							
			Dallas, TX 75	212						
	PURPOSE	(a)	Category (See	Categories listed at the	ton of this sch	edule)	(b) Description			
	OF	<b> </b> `´	Event Expens			ieuuie)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE						Check if Austir	n, TX	, officeholder living	) expense
							Pride festival	bo	oth	
-	Complete ONLY if direct		Candidate/Office	holder name		Dffice sou	thr		Office he	h
	expenditure to benefit C/OI						<u>j</u>		enice n	
		_								
	Date		Payee name							
	04/23/2024		Meed, Alex							
	Amount (\$)		Payee address	; City;	State	; Zip Co	de			
	\$900.00		311 Bowie St			•				
	+000100									
			No.1904							
			Austin, TX 78	3703						
	PURPOSE	(a)	Category (See	Categories listed at the	top of this sch	edule)	(b) Description			
	OF		Parliamentari			,	Check if travel	outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE						Check if Austir	n, TX	, officeholder living	) expense
							Parliamentar	ian		
	Complete ONLY if direct	. (	Candidate/Office	holder name	(	Dffice sou	ght		Office he	eld
	expenditure to benefit C/OI						-			

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
-	Sch: 48/66 Rpt:	Collin County Democratic Party	00054753
4	Date 01/27/2024	5 Payee name Michaels	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$110.33	965 W Bethany Dr Allen, TX 75013	
_	DUDDOCE		
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense event - decorations
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/27/2024	Michaels	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.60	801 W 15th Street	
		SuiteA	
		Plano, TX 75075	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense event - decorations
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/13/2024	Michaels	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$11.89	965 W Bethany Dr	
		Allen, TX 75013	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I <b>pplieS</b>
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)													
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)										
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)										
	Sch: 49/66 Rpt:	Collin County Democratic Party	00054753										
4	Date 04/08/2024	Payee name NGP VAN Inc.											
6	Amount (\$) \$474.37	\$474.37 PO Box 392264 Pittsburgh, PA 15251											
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense asee monthly fee										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held										
	Date	Payee name											
	05/03/2024	NGP VAN Inc.											
	Amount (\$) \$474.37	Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251											
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense asee monthly fee										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held										
	Date	Payee name											
	06/03/2024	NGP VAN Inc.											
	Amount (\$) \$474.37	Payee address;     City;     State;     Zip     Code       PO Box 392264											
		Pittsburgh, PA 15251											
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense asee monthly fee										
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held										

			EXPENDITURE CATE	GOR	RIES FOR	во	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	ains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e 'Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 50/66 Rpt:		Collin County Democratic Party						00054753	
4	Date 02/02/2024	5	Payee name NGP VAN							
6	Amount (\$) \$2,636.75		Payee address; City; S PO Box 392264 Pittsburgh, PA 15251	State;	Zip Co	de				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Solicitation/Fundraising Expense	nis sche	edule)			, TX,	officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office sou	ght			Office he	əld
	Date		Payee name							
	04/01/2024		NGP VAN							
	Amount (\$) \$264.12		Payee address; City; S PO Box 392264 Pittsburgh, PA 15251	State;	Zip Co	de				
	PURPOSE OF EXPENDITURE	<u> </u>	Category (See Categories listed at the top of the Solicitation/Fundraising Expense	nis sche	edule)			, TX,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office sou	ght			Office he	eld
	Date		Payee name							
	05/02/2024		NGP VAN							
	Amount (\$) \$228.27		Payee address; City; S PO Box 392264	State;	Zip Co	de				
			Pittsburgh, PA 15251							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Solicitation/Fundraising Expense	nis sche	edule)			, тх,	officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	Dffice sou	ght			Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide		Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:						2	Filer ID	(Ethics Commission Filers)	
1	Sch: 51/66 Rpt:		y Democratic Part	У				00054753		
4	Date	Payee name								
	06/03/2024	NGP VAN								
6	Amount (\$) \$223.51	Payee addres PO Box 392	264	State;	Zip Cod	е				
		Pittsburgh, F	PA 15251							
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Solicitation/Fundraising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit card fees for donations</li> </ul>								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Of	ffice soug	ht		Office he	eld	
	Date	Payee name								
	01/29/2024	Office Depor	t No.138							
	Amount (\$)	Payee addres	s; City;	State;	Zip Cod	e				
	\$38.96	909 N Centr	al Expresway							
		No.100								
		Plano, TX 7	5075							
	PURPOSE OF EXPENDITURE		e Categories listed at the to Fundraising Expen		dule)		n, TX,	ide of Texas. Com , officeholder living ent - decorat	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	ceholder name	Of	ffice soug	ht		Office he	eld	
	Date	Payee name								
	01/29/2024	Office Depor	t No.138							
	Amount (\$) \$32.75	Payee address;       City;       State;       Zip Code         909 N Central Expressway       No.100         Plano, TX 75075       Plano								
	PURPOSE OF EXPENDITURE		e Categories listed at the to Fundraising Expen		dule) (		n, TX,	ide of Texas. Com , officeholder living ent - decorat	expense	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Ot	ffice soug	ht		Office he	eld	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATEG Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Re Office O Polling E Printing Salaries/	payme verhea xpens Expen Wage	ent/Reimbursement ad/Rental Expense se se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	2					3	Filer ID	(Ethics Commission Filers)			
-	Sch: 52/66 Rpt:	[	Collin County Democratic Party				ľ	00054753	(,			
4	· · · · · ·	-						00004100				
4	Date 01/29/2024	5	Payee name Office Depot No.138									
_		_	·									
6	Amount (\$)	7		te; Zip C	ode							
	\$187.00		909 N Central Expresway									
			No.100									
			Plano, TX 75075									
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description						
	OF EXPENDITURE		Solicitation/Fundraising Expense					ide of Texas. Com				
								, officeholder living				
						1/27/24 gala	eve	ent - decorat	ions			
_				015				0111				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	ught			Office he	90			
	Date		Payee name									
	01/29/2024		Office Depot No.138									
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode							
	\$73.13		909 N Central Expresway									
			No.100									
			Plano, TX 75075									
_	PURPOSE	(a)			(h)	Description						
	OF	("	Category (See Categories listed at the top of this Solicitation/Fundraising Expense	schedule)			outsi	ide of Texas. Com	plete Schedule T.			
	EXPENDITURE		Solicitation/1 undraising Expense					, officeholder living				
						1/27/24 gala	eve	ent - decorat	ions			
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office he	eld			
	expenditure to benefit C/OI	-										
	Date		Payee name									
	03/25/2024		Office Depot No.138									
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode							
	\$38.96		909 N Central Expresway									
			No.100									
			Plano, TX 75075									
	DUDDOCE				(1-)							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(a)	Description	outsi	ide of Texas. Com	nlete Schedule T			
	EXPENDITURE		Event Expense					, officeholder living				
						Convention s						
	Complete ONLY if direct	L(	Candidate/Officeholder name	Office so	ught			Office he	eld			
	expenditure to benefit C/OI	Η			-							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related       Food/Beverage Expense     Polling Expense     Travel in District       y -     Gift/Awards/Memorials Expense     Printing Expense     Travel Out of District       al Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a category not listed a							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
_	Sch: 53/66 Rpt:		Collin County Democratic Party				00054753		
4	Date	5	Payee name						
	06/17/2024		Office Depot No.138						
6	Amount (\$) \$55.13	7	Payee address; City; State; 909 N Central Expresway No.100	Zip Co	le				
			Plano, TX 75075						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	office sou	ht		Office held		
	Date		Payee name						
	03/04/2024		Office Depot No.590						
	Amount (\$) \$28.13		Payee address; City; State; 1751 N. Central Expressway Bldg H McKinney, TX 75069	Zip Co	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	)ffice sou	ht		Office held		
	Date		Payee name	_					
	02/22/2024		PayPal						
	Amount (\$) \$56.39		Payee address; City; State; 2211 N 1st St	Zip Co	le				
			San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		n, TX	ide of Texas. Complete Schedule T. c, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	)ffice sou	ht		Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memor Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	rhead/F pense pense ages/C	Reimbursement Rental Expense Contract Labor e this form.		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	)
	Sch: 54/66 Rpt:			ty Democratio	c Party					00054753		
4	Date 02/23/2024	5	Payee name PayPal									
6	\$14.69 2211 N 1st St San Jose, CA 95131											
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E		iedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	02/26/2024		PayPal									
	Amount (\$) \$19.75		Payee addre 2211 N 1st San Jose, (	St	State;	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E	at the top of this sch Expense	nedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name			_				-		
	02/28/2024		PayPal									
	Amount (\$) \$9.12		Payee addre 2211 N 1st		State	; Zip Co	de					
			San Jose, (	CA 95131								
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising E	at the top of this sch Expense	nedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	(	Dffice sou	ght			Office he	eld	

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	By -     Gift/Awards/Memorials Expense     Polling Expense     Travel in District       By -     Gift/Awards/Memorials Expense     Printing Expense     Travel Out of District       Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a call							quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filer	rs)
	Sch: 55/66 Rpt:			ity Democrati	c Party					00054753		
4	Date 03/04/2024	5	Payee name PayPal									
6	Amount (\$) \$2.14	\$2.14 2211 N 1st St San Jose, CA 95131										
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listec 'Fundraising		nedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	e (	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/05/2024		PayPal									
	Amount (\$) \$19.08		Payee addre 2211 N 1st San Jose, (	St	State	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)		ee Categories listec 'Fundraising I	I at the top of this sch Expense	nedule)			, TX,	de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	9 (	Office sou	ght			Office he	eld	
	Date		Payee name	-						-		
	03/06/2024		PayPal									
	Amount (\$) \$18.94		Payee addre 2211 N 1st		State	; Zip Co	de					
			San Jose, (	CA 95131								
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed Fundraising I	I at the top of this sch Expense	nedule)			, TX,	de of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	e (	Dffice sou	ght			Office he	eld	

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees     Office Overhead/Rental Expense     Transporta       Food/Beverage Expense     Polling Expense     Travel in D       y -     Gift/Awards/Memorials Expense     Printing Expense     Travel out       al Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (e							Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)		
	Sch: 56/66 Rpt:			ty Democratic	Party				00054753			
4	Date 03/08/2024	5	Payee name PayPal									
6	Amount (\$) \$3.84	\$3.84 2211 N 1st St San Jose, CA 95131										
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed at Fundraising E>		nedule)		n, TX,	de of Texas. Com , officeholder living			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name		Office sou	ght		Office he	eld		
	Date		Payee name									
	03/11/2024		PayPal									
	Amount (\$) \$2.57		Payee addre 2211 N 1st San Jose, C	St	State	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Category (Se	ee Categories listed a Fundraising Ex		nedule)		n, TX,	de of Texas. Com , officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Dffice sou	ght		Office he	eld		
	Date		Payee name									
	03/21/2024		PayPal									
	Amount (\$) \$2.79		Payee addre 2211 N 1st		State	; Zip Co	de					
			San Jose, C	CA 95131								
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a Fundraising Ex		nedule)		n, TX,	de of Texas. Com , officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Dffice sou	ght		Office he	eld		

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E nmittee Legal Services The Instruction Guid	xpense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 57/66 Rpt:		Collin County Democratic Pa	rty				00054753	
4	Date	5	Payee name						
	03/20/2024		Red Dog Custom Designs						
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le			
	\$200.00		3421 Chacon Creek Trail						
			Prosper, TX 75078						
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Expe					ide of Texas. Complete Schedule T.	
								a, officeholder living expense	
						Office suppli	es		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	(	Office sou	lht		Office held	
	Date		Payee name						
	01/23/2024		Ritchie, Farrel						
	Amount (\$)		Payee address; City;	State	; Zip Co	le			
	\$480.00		2200 Taylor-Burk Dr		, 1				
	+								
			McKinney, TX 75071						
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Solicitation/Fundraising Expe	ense				side of Texas. Complete Schedule T.	
						1/27/24 gala		c, officeholder living expense	
						1/27/24 yala	eve	ent - security	
			Condidate /Office helder nome						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	(	Office sou	Int		Office held	
		-							
	Date		Payee name						
	01/10/2024		Scale to Win						
	Amount (\$)		Payee address; City;	State	; Zip Coo	le			
	\$10.72		13742 Harper Street						
			Santa Ana, CA 92703						
	PURPOSE	(a)	Category (See Categories listed at the		nedule)	(b) Description			
	OF EXPENDITURE		Solicitation/Fundraising Expe	ense				ide of Texas. Complete Schedule T.	
								a, officeholder living expense	
						1/2//24 yala	eve	ent - texting service	
	Operations Operations	L			O.45 -			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	(	Office sou	Int		Office held	
		-							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FILE	R NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 58/66 Rpt:		in County Democratic Pa	rty				00054753	
4	Date 02/05/2024		ee name le to Win						
6	Amount (\$) \$3,926.99	137	e address; City; 42 Harper Street ta Ana, CA 92703	State;	; Zip Coo	le			
8	PURPOSE OF EXPENDITURE		gory (See Categories listed at the citation/Fundraising Expe		nedule)		n, TX,	de of Texas. Com , officeholder living ent - texting :	expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Paye	e name						
	02/05/2024	She	raton McKinney Hotel						
	Amount (\$)	Paye	ee address; City;	State;	; Zip Coo	le			
	\$12,334.37		0 Gateway Blvd Cinney, TX 75070						
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the citation/Fundraising Expe		nedule)		n, TX,	de of Texas. Com , officeholder living emt - location	) expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Paye	e name						
	03/01/2024	Sim	plisafe Inc.						
	Amount (\$) \$32.46	294 Nint	ee address; City; Washington St h Floor ton, MA 02108	State;	; Zip Coo	le			
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the ce Overhead/Rental Expe		nedule)		n, TX,	de of Texas. Com , officeholder living <b>`ing</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	C	Office soug	ht		Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	e Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	yment/Reimbursement rhead/Rental Expense pense pense lages/Contract Labor		Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:	2	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)		
	Sch: 59/66 Rpt:		Collin Cour	nty Democratic Pa	arty				00054753			
4	Date	5	Payee name									
	04/01/2024		Simplisafe	Inc.								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$32.46		294 Washir	ngton St								
			Ninth Floor									
			Boston, MA 02108									
8	PURPOSE	(a)		ee Categories listed at the	a tan of this och	odulo)	(b) Description					
-	OF			head/Rental Exp		euule)		outsi	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE								, officeholder living	j expense		
							Security mon	itor	ring			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder name	(	Office sou	ght		Office he	eld		
	Date		Payee name									
	04/30/2024		Simplisafe	Inc.								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$32.46		294 Washir	ngton St								
			Ninth Floor									
			Boston, MA	02108								
	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b) Description					
	OF EXPENDITURE			head/Rental Exp		,	Check if travel		ide of Texas. Com			
	EXPENDITORE								, officeholder living	g expense		
							Security mon	itor	ring			
	Complete ONIL V if direct		Candidata/Off	iceholder name			abt		Office he			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		canuluale/OII		(	Office sou	JII		Onice ne	eiu		
_	Data	<u> </u>	Device recent									
	Date 05/30/2024		Payee name Simplisafe									
	Amount (\$)	-	Payee addre		Stato	; Zip Co	do					
	\$32.46		294 Washir		Sidle	, Zip Cu	ue					
	432.40		Ninth Floor	0								
			Boston, MA									
	PURPOSE OF	(a)		ee Categories listed at the		edule)	(b) Description	outei	ide of Texas. Com	nlete Schedule T		
	EXPENDITURE		Office Over	head/Rental Exp	ense				, officeholder living			
							Security mon					
	Complete ONLY if direct		Candidate/Off	iceholder name	(	Office sou	ght		Office he	eld		
	expenditure to benefit C/OI	Н										

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services	pense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	ayment/F rhead/R pense pense /ages/Co	Reimbursement vental Expense ontract Labor		Transportation E Travel in District Travel Out of Di		
1	Total pages Schedule F1:	12		<b></b>					2	Filer ID	(Ethics Commission	Filers)
-	Sch: 60/66 Rpt:	1			e Dorty				J	00054753		i licitoj
	Scil. 00/00 Rpl.		Comin Cour	nty Democrati	C Party					00054755		
4	Date	5	Payee name	•								
	02/01/2024		SiteGround	Hosting Inc.								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$604.42		901 N Pitt \$									
	¢00 II I2											
			Suite 325									
			Alezxandria, VA 22314									
8	PURPOSE	(a)	Category (S	See Categories listed	I at the top of this sch	nedule)	<b>(b)</b> D	escription				
	OF EXPENDITURE			rhead/Rental		ŗ		Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE							_	, тх,	officeholder living	g expense	
							V	VebHosting				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	e (	Office sou	ght			Office h	eld	
	Date		Payee name	2								
	03/25/2024		SiteGround	Hosting Inc.								
_	Amount (\$)	$\vdash$	Payee addre	•	State	; Zip Co	do					
	.,			-	State	, zip co	ue					
	\$63.83		901 N Pitt S	51								
			Suite 325									
			Alezxandria	a, VA 22314								
	PURPOSE	(a)	Category (s	an Catagorias listor	I at the top of this sch	odulo)	(b) D	escription				
	OF	``		rhead/Rental		icuaic)	Г		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		0				Ē	Check if Austin,	, тх,	officeholder living	j expense	
							V	VebHosting				
	Complete ONLY if direct	(	Candidate/Off	iceholder name	e (	Office sou	aht			Office h	eld	
	expenditure to benefit C/OF	Н					5					
_		1										
	Date		Payee name									
	03/19/2024		Spano, Jos	seph								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$450.00		2200 Taylo	r-Burk Drive								
			McKinney,	TX 75071								
	PURPOSE	(a)	Category (S	See Categories listed	I at the top of this sch	nedule)	<b>(b)</b> D	escription				
	OF EXPENDITURE		Event Expe	ense				4			plete Schedule T.	
							Ľ	_		officeholder living	g expense	
							С	convention s	ecı	urity		
	Complete ONLY if direct		Candidate/Off	iceholder name	e (	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 61/66 Rpt:									
4	Date 01/27/2024	5 Payee name Staples								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$185.11	Allen, TX 75013								
8	PURPOSE	(a) Category (or organize listed at the transfit is a table of (b) Description								
8       PURPOSE         OF         EXPENDITURE    (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 1/27/24 gala event - decorations										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
06/13/2024 Staples										
	Amount (\$)	Payee address; City; State; Zip Code								
	\$109.29	812 West McDermott Dr Allen, TX 75013								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense Oplies							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/13/2024	Target								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$19.47 907 West McDermott Dr									
		Allen, TX 75013								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense Oplies							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 62/66 Rpt:		Collin County Democratic Party				00054753			
4	Date	5	Payee name							
	04/08/2024		The Flower Cottage							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode					
	\$62.68		102 W. Belmont Street							
			Allen, TX 75013							
8	PURPOSE	(2)			(b) Departmention					
Ô	OF	(a)	Category (See Categories listed at the top of this so Gift/Awards/Memorials Expense	hedule)	(b) Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE						, officeholder living expense			
					Flowers for s	pee	edy recovery			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght		Office held			
	Date		Payee name							
01/18/2024 Thomas, Terrance										
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$350.00		530 Buckingham Rd							
			Apt 832							
			Richardson, TX 75081							
_	PURPOSE	(2)			(b) Description					
	OF	(")	Category (See Categories listed at the top of this so Solicitation/Fundraising Expense	hedule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin	, тх	, officeholder living expense			
					1/27/24 gala	eve	ent - balance for DJ			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ıght		Office held			
	expenditure to benefit C/OI									
	Date		Payee name							
	01/27/2024		UPS							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$37.89		224 W Campbell Rd							
			Richardson, TX 75080							
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b) Description					
	OF EXPENDITURE		Solicitation/Fundraising Expense	,			ide of Texas. Complete Schedule T.			
	EXPENDITORE						officeholder living expense			
					1/27/24 gala	eve	ent - decorations			
_				- <i>W</i>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght		Office held			
		-								

		EXPE	NDITURE CATEGOR	IES FOR E	OX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Travel in District Travel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:					3	Filer ID	(Ethics Commission Filers)		
-	Sch: 63/66 Rpt:	Collin County Demo	cratic Party				00054753	()		
4	Date 02/29/2024	ayee name Inited States Treas	ury							
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$303.60       Internal Revenue Service         Ogden, UT 84201									
8	PURPOSE OF EXPENDITURE	OF Fees								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder	name O	ffice sough	t		Office he	ld		
	Date	ayee name								
	02/29/2024 United States Treasury									
	Amount (\$) \$126.00	ayee address; C nternal Revenue Se Ogden, UT 84201		Zip Code						
	PURPOSE OF EXPENDITURE	Category (See Categorie	s listed at the top of this sche	<sub>dule)</sub> (b		n, TX,	de of Texas. Comp officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder	name O	ffice sough	t		Office he	ld		
	Date 03/20/2024	ayee name Iniversal Plumbing	Service LLC							
	Amount (\$) \$400.00	ayee address; C 560 Toronto Street	-	Zip Code						
		allas, TX 75212								
	PURPOSE OF EXPENDITURE	ategory <sub>(See Categorie</sub> Office Overhead/Re	s listed at the top of this sche ntal Expense	dule) (b			de of Texas. Comp officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder	name O	ffice sough	t		Office he	ld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/R Food/Beverage Expense Polling Expense e By - Gift/Awards/Memorials Expense Printing Expense				e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 64/66 Rpt:		00054753							
4	Date	5	Payee name							
	06/10/2024 Universal Plumbing Service LLC									
6	Amount (\$) 7 Payee address; City; State; Zip Code									
	\$362.64 3560 Toronto Street									
			Dallas, TX 75212							
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description				
	OF		Office Overhead/Rental Expense	should			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE						, TX,	, officeholder living expense		
						Plumbing				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held		
	Date		Payee name							
05/16/2024 Vonage Business Inc										
_	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$135.40		Dept. 3151	o,p oo						
	φ <u>1</u> 00.+0		PO Box 123151							
			Dallas, TX 75312							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this set	chedule)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Telephone se				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l .ght			Office held		
	expenditure to benefit C/OI	H								
	Date		Payee name							
	06/17/2024		Vonage Business Inc							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$135.40		Dept. 3151							
			PO Box 123151							
			Dallas, TX 75312							
	PURPOSE	(a)	Category (See Categories listed at the top of this so	shodulo)	(b)	Description				
	OF	ľ	Office Overhead/Rental Expense	cheddie)	Ì`́		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense		
						Telephone se	ervi	ce		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held		
	expenditure to benefit C/OI	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Committee     Legal Services     Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 65/66 Rpt:	65/66 Rpt:         Collin County Democratic Party         00054753								
4	Date 06/07/2024	Payee name WP Forms								
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$399.00       5592 Whirlaway Road									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense Website form builder										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/24/2024	Walmart								
	Amount (\$) \$24.29	Payee address; City; State; Zip Code 2662 W Lucas Rd								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense event - decorations							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/26/2024	Zoom Video Communications Inc.								
	Amount (\$) \$53.30	Payee address;     City;     State;     Zip     Code       55 Amaden Blvd								
		San Jose, CA 95113								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					d/Rental Expense e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 66/66 Rpt:		Collin County Democratic Party					00054753			
4	Date	5	Payee name								
	04/26/2024     Zoom Video Communications Inc.										
6	Amount (\$) 7 Payee address; City; State; Zip Code										
	\$53.30		55 Amaden Blvd								
			San Jose, CA 95113								
8	PURPOSE	(0)			(h)	Description					
ð	OF	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)	(u)	Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Once Overhead/Rental Expense					, officeholder living expense			
						Monthly fee					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office held			
	Date		Payee name								
05/28/2024 Zoom Video Communications Inc.											
	Amount (\$)		Payee address; City; State	; Zip Co	de						
	\$53.30		55 Amaden Blvd	•							
			San Jose, CA 95113								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						Monthly fee	, 17,				
						monuny loo					
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held			
	expenditure to benefit C/Oł				gin						
_	Date		Payee name								
	06/26/2024		Zoom Video Communications Inc.								
	Amount (\$)	Payee address; City; State; Zip Code									
	\$53.30		55 Amaden Blvd	., zip 00	uc						
	400.00										
	San Jose, CA 95113										
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						Monthly fee	, 17,	, unicerioider living expense			
						monuny ice					
-	Complete ONLY if direct	L	Candidate/Officeholder name	Office sou	nht			Office held			
	expenditure to benefit C/OI				ynt						
_											

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

SCHEDULE K

	The Instrue	bages Schedule K: 1/2 Rpt: 259/260							
2	FILER NAME		D (Ethics Commission I	-ilers)					
	Collin Count	y D	Democratic Party		00054		-		
4	Date	5	8 Amount (\$)						
	01/31/2024		Prosperity Bank			\$16.17			
	1	6	Address of person from whom amount is received; City; State; Zip Code						
	l	Ļ	•	·····					
		7	Purpose for which amount is received Check if p Bank Interest	ροιιτι	cal con	tribution returned to filer			
		Ļ				1			
	Date		Name of person from whom amount is received			Amount (\$)	<b>*</b> 25 E6		
	02/29/2024		Prosperity Bank				\$35.56		
			Address of person from whom amount is received; City; State; Zip Code						
			Plano, TX 75086						
	l	⊢		noliti	cal con	I tribution returned to filer			
			Bank Interest		001 0 - 1				
-	Date	는	Name of person from whom amount is received			Amount (\$)			
	03/31/2024		Prosperity Bank			Amount (\$)	\$55.58		
	00,02,212				<b>QUEL</b>				
			Address of person from whom amount is received; City; State; Zip Code						
	I		Plano, TX 75086						
	1		Purpose for which amount is received	politi	cal con	tribution returned to filer			
			Bank Interest						
	Date	Ē	Name of person from whom amount is received			Amount (\$)			
	04/30/2024		Prosperity Bank				\$53.86		
	I		Address of person from whom amount is received; City; State; Zip Code						
	I	$\vdash$	Plano, TX 75086	1:4:		· · · · · · · · · · · · · · · · · · ·			
			Purpose for which amount is received Check if p Bank Interest	politi	cal con	tribution returned to filer			
⊨		Ļ				1			
	Date		Name of person from whom amount is received			Amount (\$)	<b>ተ</b> ርር 70		
	05/31/2024		Prosperity Bank Address of person from whom amount is received; City; State; Zip Code				\$55.72		
			Plano, TX 75086						
	I	⊢		noliti	cal con	I tribution returned to filer			
			Bank Interest						
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	cti		ages Schedule K: /2 Rpt: 260/260			
2	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Collin Count	y D	emocratic Party		00054	753	
4	Date	5	Name of person from whom amount is received	8 Amount (\$)			
	06/30/2024		Prosperity Bank			\$53.99	
		 6	Address of person from whom amount is received; City; State; Zip Code				
		ľ					
			Plano, TX 75086				
		7		if politi	cal contr	I ibution returned to filer	
			Bank Interest	ii poin			
⊢							