



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> The 134 Political Action Committee	<b>13 Filer ID</b> (Ethics Commission Filers) 00085309
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,280.10
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 13,631.16
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 1,248.96
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

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

Mrs. Carla S. Porter  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> The 134 Political Action Committee		<b>18 Filer ID</b> (Ethics Commission Filers) 00085309
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,365.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,915.10
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 13,631.16
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/37 Rpt: 4/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Marfa, TX 79843	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Designer		<b>9</b> Employer (See Instructions) Self
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code  Marfa, TX 79843	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code  Marfa, TX 79843	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code  Marfa, TX 79843	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> Contributor address; City; State; Zip Code  Marfa, TX 79843	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/37 Rpt: 5/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beebe, Hilary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Marfa, TX 79843	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Designer		<b>9</b> Employer (See Instructions) Self
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 03/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/37 Rpt: 6/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78212		
<b>8</b> Principal occupation / Job title (See Instructions) Librarian		<b>9</b> Employer (See Instructions) Trinity University
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caraway, Bea	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78212		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Trinity University
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Mertzson, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Mertzson, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Mertzson, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/37 Rpt: 7/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 04/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Mertzon, TX 76941		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Mertzon, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cravens, Richie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Mertzon, TX 76941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cronshey, Richard	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cronshey, Richard	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/37 Rpt: 8/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cronshey, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kyle, TX 78640	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 04/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cronshey, Richard <hr/> Contributor address; City; State; Zip Code  Kyle, TX 78640	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cronshey, Richard <hr/> Contributor address; City; State; Zip Code  Kyle, TX 78640	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dudding, Janet <hr/> Contributor address; City; State; Zip Code  Bryan, TX 77802	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Acct		Employer (See Instructions) BVCOG
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Finke, Douglas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Sr. Copywriter		Employer (See Instructions) Radancy



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/37 Rpt: 9/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> <b>6</b> Contributor address; City; State; Zip Code  Edinburg, TX 78541	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78541	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78541	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78541	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78541	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/37 Rpt: 10/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Irasema <hr/> <b>6</b> Contributor address; City; State; Zip Code  Edinburg, TX 78541	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/37 Rpt: 11/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79407	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) GibsonFirm
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 04/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/37 Rpt: 12/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79407	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) GibsonFirm
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) GibsonFirm
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/37 Rpt: 13/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Analyst		<b>9</b> Employer (See Instructions) Self Employed
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code  Mineral Wells, TX 76067	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self Employed
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code  Washington, TX 20009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/37 Rpt: 14/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, TX 20009	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code  Washington, TX 20009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code  Washington, TX 20009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code  Washington, TX 20009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Daniel <hr/> Contributor address; City; State; Zip Code  Washington, TX 20009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/37 Rpt: 15/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) assistant director		<b>9</b> Employer (See Instructions) University of Texas Houston
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 03/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 04/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) assistant director		Employer (See Instructions) University of Texas Houston

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/37 Rpt: 16/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEROD, BRIAN <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77252	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) assistant director		<b>9</b> Employer (See Instructions) University of Texas Houston
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76085	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76085	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Jackson Walker LLP



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/37 Rpt: 17/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Angelo, TX 76901	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Jackson Walker LLP
<b>Date</b> 04/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> <b>Contributor address; City; State; Zip Code</b>  San Angelo, TX 76901	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Lawyer		<b>Employer (See Instructions)</b> Jackson Walker LLP
<b>Date</b> 05/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> <b>Contributor address; City; State; Zip Code</b>  San Angelo, TX 76901	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Lawyer		<b>Employer (See Instructions)</b> Jackson Walker LLP
<b>Date</b> 06/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon <hr/> <b>Contributor address; City; State; Zip Code</b>  San Angelo, TX 76901	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Lawyer		<b>Employer (See Instructions)</b> Jackson Walker LLP
<b>Date</b> 06/25/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogg, Jon Mark <hr/> <b>Contributor address; City; State; Zip Code</b>  San Angelo, TX 76901	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Lawyer		<b>Employer (See Instructions)</b> Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/37 Rpt: 18/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hurley, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Angelo, TX 76904	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hurley, David <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) J Wesson, Cynthia <hr/> Contributor address; City; State; Zip Code  DRIPPING SPGS, TX 78620	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75203	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75203	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/37 Rpt: 19/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75203		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinsey, Alice	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  San Angelo, TX 76901		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/37 Rpt: 20/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Angelo, TX 76901	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) San Angelo Early Childhood Center
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lackey, Cynthia <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) San Angelo Early Childhood Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/37 Rpt: 21/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LeUnes, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  College Station, TX 77845	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) President of a Non-Profit		<b>9</b> Employer (See Instructions) self
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> Contributor address; City; State; Zip Code  Hereford, TX 79045	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> Contributor address; City; State; Zip Code  Hereford, TX 79045	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> Contributor address; City; State; Zip Code  Hereford, TX 79045	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> Contributor address; City; State; Zip Code  Hereford, TX 79045	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/37 Rpt: 22/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hereford, TX 79045	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Associate		<b>9</b> Employer (See Instructions) Laurel Strategies
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Link, Jacob <hr/> Contributor address; City; State; Zip Code  Hereford, TX 79045	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Laurel Strategies
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morales, Heriberto <hr/> Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack Inc
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/37 Rpt: 23/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions) Coordinated Campaign Director		<b>9</b> Employer (See Instructions) Texas Democratic Party
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mosley, Brooklynne	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Coordinated Campaign Director		Employer (See Instructions) Texas Democratic Party
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Eagle Pass, TX 78852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 21/37 Rpt: 24/62
2 FILER NAME The 134 Political Action Committee		3 Filer ID (Ethics Commission Filers) 00085309
4 Date 02/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Nevarez Law Group PC
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevarez, Poncho	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nevarez Law Group PC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/37 Rpt: 25/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nikolatos, John	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78228-2003		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  New Waverly, TX 77358		
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  New Waverly, TX 77358		
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  New Waverly, TX 77358		
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  New Waverly, TX 77358		
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/37 Rpt: 26/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  New Waverly, TX 77358		
<b>8</b> Principal occupation / Job title (See Instructions) Faa		<b>9</b> Employer (See Instructions) Atcs
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Sheryl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  New Waverly, TX 77358		
Principal occupation / Job title (See Instructions) Faa		Employer (See Instructions) Atcs
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Julianne	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Julianne	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Julianne	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/37 Rpt: 27/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 04/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Julianne <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reeves, Julianne <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/37 Rpt: 28/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 04/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Angelo, TX 76901	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Pediatrician		<b>9</b> Employer (See Instructions) Shannon Clinic
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seifert, Sandra <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Pediatrician		Employer (See Instructions) Shannon Clinic
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/37 Rpt: 29/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> <b>6</b> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Social Service		<b>9</b> Employer (See Instructions) Bluebonnet Homes
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slone, Jeri <hr/> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76903	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Service		Employer (See Instructions) Bluebonnet Homes
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Susan <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/37 Rpt: 30/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 04/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Susan <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Susan <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code  San angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code  San angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/37 Rpt: 31/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> <b>6</b> Contributor address; City; State; Zip Code  San angelo, TX 76904	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code  San angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code  San angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stribling, Shelly <hr/> Contributor address; City; State; Zip Code  San angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> Contributor address; City; State; Zip Code  Burnet, TX 78611	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/37 Rpt: 32/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Burnet, TX 78611	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> Contributor address; City; State; Zip Code  Burnet, TX 78611	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> Contributor address; City; State; Zip Code  Burnet, TX 78611	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> Contributor address; City; State; Zip Code  Burnet, TX 78611	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> Contributor address; City; State; Zip Code  Burnet, TX 78611	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/37 Rpt: 33/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Guy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Burnet, TX 78611	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code  Canyon, TX 79015	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code  Canyon, TX 79015	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code  Canyon, TX 79015	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi <hr/> Contributor address; City; State; Zip Code  Canyon, TX 79015	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/37 Rpt: 34/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Canyon, TX 79015		
<b>8</b> Principal occupation / Job title (See Instructions) R.N. And Professor		<b>9</b> Employer (See Instructions) Texas Wesleyan u.
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Heidi	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Canyon, TX 79015		
Principal occupation / Job title (See Instructions) R.N. And Professor		Employer (See Instructions) Texas Wesleyan u.
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Kathy	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Amarillo, TX 79102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dubin, TX 76446		
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dubin, TX 76446		
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/37 Rpt: 35/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Dubin, TX 76446		
<b>8</b> Principal occupation / Job title (See Instructions) artist and writer		<b>9</b> Employer (See Instructions) self
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dubin, TX 76446		
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dubin, TX 76446		
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Suzann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dubin, TX 76446		
Principal occupation / Job title (See Instructions) artist and writer		Employer (See Instructions) self
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code  Austin, TX 78723		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/37 Rpt: 36/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Microsoft
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turknett, Robert <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/37 Rpt: 37/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Mary	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704		
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) n/a
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Michele	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Horseshoe Bay, TX 78657		
Principal occupation / Job title (See Instructions) Real estat5		Employer (See Instructions) Self
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Michele	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Horseshoe Bay, TX 78657		
Principal occupation / Job title (See Instructions) Real estat5		Employer (See Instructions) Self
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waters, Nolan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/37 Rpt: 38/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Phillip <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/37 Rpt: 39/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) pharmacist		<b>9</b> Employer (See Instructions) walmart
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions) walmart

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/37 Rpt: 40/62
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) conley, judith	<b>7</b> Amount of Contribution (\$)  \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	
<b>8</b> Principal occupation / Job title (See Instructions) pharmacist		<b>9</b> Employer (See Instructions) walmart
<b>Date</b> 03/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) hastings, john	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Meridian, TX 76665	
<b>Principal occupation / Job title (See Instructions)</b> attorney		<b>Employer (See Instructions)</b> John A. Hastings Jr. attorney at law



# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 41/62	
<b>2</b> FILER NAME The 134 Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00085309	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 03/04/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchenko for Texas <hr/> <b>7</b> Contributor address; City; State; Zip Code  Houston, TX 77052	<b>8</b> Amount of contribution (\$) \$2,915.10	<b>9</b> In-kind contribution description
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Check if travel outside of Texas. Complete Schedule T.

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/21 Rpt: 42/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/30/2024	<b>5</b> Payee name Burnett County Democratic Party	
<b>6</b> Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO BOX 171  Marble Falls, TX 78654	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV GRANT
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/07/2024	Candidate/Officeholder name CODA	
Amount (\$) \$57.04  <input type="checkbox"/> Expenditure from corporate funds	Office sought 100 Watercourse Way  Bastrop, TX 78602	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event purchase
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/07/2024	Candidate/Officeholder name Comfort Inn	
Amount (\$) \$150.56  <input type="checkbox"/> Expenditure from corporate funds	Office sought 801 S Jbs Pkwy  Odessa, TX 79761	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/21 Rpt: 43/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
---	---	--

<b>4</b> Date 01/02/2024	<b>5</b> Payee name First Financial Bank
-----------------------------	---

<b>6</b> Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees for account
---------------------------------	---	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 01/16/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Commerical Bank Acct Fee
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/01/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Acct Fee
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/21 Rpt: 44/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
---	---	--

<b>4</b> Date 02/15/2024	<b>5</b> Payee name First Financial Bank
-----------------------------	---

<b>6</b> Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
--	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Services Fee
---------------------------------	---	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 03/01/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Acct Fee
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 03/26/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Fees
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/21 Rpt: 45/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
---	---	--

<b>4</b> Date 03/05/2024	<b>5</b> Payee name First Financial Bank
-----------------------------	---

<b>6</b> Amount (\$) \$35.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
--	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Commercial Fee
---------------------------------	---	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 04/01/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
--	--

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 04/15/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
---	--

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Acct Fee
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/21 Rpt: 46/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
---	---	--

<b>4</b> Date 05/01/2024	<b>5</b> Payee name First Financial Bank
-----------------------------	---

<b>6</b> Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Acct Fee
---------------------------------	---	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/15/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Acct Fees
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/03/2024	Payee name First Financial Bank
--------------------	------------------------------------

Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Pine Street  Abliene, TX 79601
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/21 Rpt: 47/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
---	---	--

<b>4</b> Date 06/17/2024	<b>5</b> Payee name First Financial Bank
-----------------------------	---

<b>6</b> Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Pine Street  Abilene, TX 79601
--	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Account Fees
---------------------------------	---	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 01/02/2024	Payee name Google
--------------------	----------------------

Amount (\$) \$38.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway  Mountain View, CA 94043
---	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Drive -Storage
-------------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/01/2024	Payee name Google
--------------------	----------------------

Amount (\$) \$50.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway  Mountain View, CA 94043
---	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Storage Fee
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/21 Rpt: 48/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/01/2024	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) \$38.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1600 Ampitheatre Parkway  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Storage Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2024	Payee name Google	
Amount (\$) \$40.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Storage Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2024	Payee name Google	
Amount (\$) \$46.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheatre Parkway  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Site Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/21 Rpt: 49/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 06/03/2024	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) \$46.05  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1600 Ampitheathre Parkway  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Storage Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2024	Payee name Holiday Inn	
Amount (\$) \$119.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6023 45th Street  Lubbock, TX 79407	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2024	Payee name Howard County Democratic Party	
Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2281  BIG SPRING , TX 79721	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/21 Rpt: 50/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 03/05/2024	<b>5</b> Payee name L2	
<b>6</b> Amount (\$) \$2,915.10  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 18912 North Creek Parkway Bldg. 1, Suite 201  Bothell, WA 98011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Purchase of Data	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Data
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2024	Payee name L2	
Amount (\$) \$76.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 18912 North Creek Parkway Bldg. 1, Suite 201  Bothell, WA 98011	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Data Purchase	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Purchase
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2024	Payee name Later.com	
Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Social Media Platform	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/21 Rpt: 51/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/15/2024	<b>5</b> Payee name Later.com	
<b>6</b> Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
Date 03/15/2024	Candidate/Officeholder name Office sought Office held	
Date 03/15/2024	Payee name Later.com	
Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Social Media Platform	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform
Complete ONLY if direct expenditure to benefit C/OH		
Date 04/15/2024	Candidate/Officeholder name Office sought Office held	
Date 04/15/2024	Payee name Later.com	
Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Social Media Platform Fee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform Fee
Complete ONLY if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/21 Rpt: 52/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 05/15/2024	<b>5</b> Payee name Later.com	
<b>6</b> Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Social Media Platform Fee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2024	Payee name Later.com	
Amount (\$) \$42.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 88 E Pender Street  Vancouver Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Social Media Platform Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Platform Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2024	Payee name Mothers Against Greg Abbott	
Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. Box 27881  Austin, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/21 Rpt: 53/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
--	---	--

<b>4</b> Date 02/12/2024	<b>5</b> Payee name Northern Cameron County Democrats
-----------------------------	--

<b>6</b> Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 24336 Preston Trail  Harlingen, TX 78552
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV GRANT
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/22/2024	Payee name Rangel , Hector
--------------------	-------------------------------

Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1407 Pecos Street  Lockhart, TX 78644
--	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate filing fees
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/12/2024	Payee name San Jacinto County Democratic Party
--------------------	---

Amount (\$) \$350.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3021  San Jacinto , TX 77359
--	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV Grant
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/21 Rpt: 54/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
--	---	--

<b>4</b> Date 01/26/2024	<b>5</b> Payee name Survey Monkey
-----------------------------	--------------------------------------

<b>6</b> Amount (\$) \$493.27  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 111 SW 5th  Ave Portland, OR 97204-0000
---	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach and Data Provider Fee
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/29/2024	Payee name Texas Ethics CO
--------------------	-------------------------------

Amount (\$) \$12.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 201 E 14TH Street 10th Floor Austin , TX 78701
---	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment Fee
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/29/2024	Payee name Texas Ethics CO
--------------------	-------------------------------

Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 201 E 14TH Street 10th Floor Austin , TX 78701
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment Fee
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/21 Rpt: 55/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/12/2024	<b>5</b> Payee name Thibodeau, Pollyanna	
<b>6</b> Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 405 NE 4TH Street  Hubbard, TX 76648	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2024	Candidate/Officeholder name USPS	
Amount (\$) \$9.85  <input type="checkbox"/> Expenditure from corporate funds	Office sought 106 N. 5th Street  Palo Pinto, TX 76484	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Postage	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/06/2024	Candidate/Officeholder name USPS	
Amount (\$) \$5.28  <input type="checkbox"/> Expenditure from corporate funds	Office sought 106 N. 5th Street  Palo Pinto, TX 76484	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Postage	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/21 Rpt: 56/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 02/11/2024	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 106 N. 5th Street  Palo Pinto, TX 76484	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Box Annual Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Weatherford Democrat	
Amount (\$) \$15.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 512 Palo Pinto St.  Weatherford, TX 76086	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscription Fee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2024	Payee name Zapata, Mararito Mickey	
Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 110 North Main Street  Fentress, TX 78622	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/21 Rpt: 57/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/29/2024	<b>5</b> Payee name Zoom	
<b>6</b> Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Meeting Services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/27/2024	Candidate/Officeholder name Zoom	
Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	Office sought 55 Almaden Blvd 6th Floor San Jose, CA 95113	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Meeting Services
Office held		
Date 03/27/2024	Candidate/Officeholder name Zoom	
Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	Office sought 55 Almaden Blvd 6th Floor San Jose, CA 95113	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web-Video Meeting Fee
Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/21 Rpt: 58/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 04/29/2024	<b>5</b> Payee name Zoom	
<b>6</b> Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Meeting Service
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2024	Payee name Zoom	
Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Meeting Provider
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2024	Payee name Zoom	
Amount (\$) \$17.04  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Meeting Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/21 Rpt: 59/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/31/2024	<b>5</b> Payee name iPay	
<b>6</b> Amount (\$) \$4.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for Google Drive
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name iPay		
Amount (\$) \$4.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Pay Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name iPay		
Amount (\$) \$4.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Pay Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/21 Rpt: 60/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
--	---	--

<b>4</b> Date 04/30/2024	<b>5</b> Payee name iPay
-----------------------------	-----------------------------

<b>6</b> Amount (\$) \$4.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501
---	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Payment Fee
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/31/2024	Payee name iPay
--------------------	--------------------

Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Pay Fee
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/28/2024	Payee name iPay
--------------------	--------------------

Amount (\$) \$4.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 918 Abner  Waycross, GA 31501
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Pay Fee
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/21 Rpt: 61/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
<b>4</b> Date 01/26/2024	<b>5</b> Payee name wix.com	
<b>6</b> Amount (\$) \$31.39  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Provider Monthly Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name wix.com	
Amount (\$) \$31.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web/Email Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2024	Payee name wix.com	
Amount (\$) \$31.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web/Email Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/21 Rpt: 62/62	<b>2</b> FILER NAME The 134 Political Action Committee	<b>3</b> Filer ID (Ethics Commission Filers) 00085309
--	---	--

<b>4</b> Date 04/26/2024	<b>5</b> Payee name wix.com
-----------------------------	--------------------------------

<b>6</b> Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) website/Email Service	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website/Email Service
---------------------------------	--	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/28/2024	Payee name wix.com
--------------------	-----------------------

Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Email and Website Provider	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email and Website provider
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/26/2024	Payee name wix.com
--------------------	-----------------------

Amount (\$) \$31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Tery A Francois Blvd  San Francisco , CA 94158
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website/ Email Service Fee
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------