FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015831 3 COMMITTEE NAME **OFFICE USE ONLY Texas Democratic Party** Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **ADDRESS** 314 E Highland Mall Blvd, Suite 508 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78752 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Gilberto NAME NICKNAME LAST **SUFFIX** Hinojosa STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 314 E Highland Mall Blvd, Suite 508 STREET **ADDRESS** (Residence or Business) Austin, TX 78752 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 314 E Highland Mall Blvd MAILING **ADDRESS** Suite 508 Austin, TX 78752 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 478-9800 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 02/25/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Texas Democratic Part	Texas Democratic Party					
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Laurel Swift State Representa	tive			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 533,883.9					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	0.00			
	4. TOTAL POLITICAL EXPENDITURES \$ 1,012					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,293.89		
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT			·			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		The Honorable	Gilberto Hinojo	osa		
		Signature of Ca	mpaign Treasur	er		
AFFIX NOTAR)	/ STAMP / SEAL ABOVE					
Sworn to and subscribed	d before me, by the said	, tl	his the	day		
		which, witness my hand and seal of office.				
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of office	er administering oath		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	,					(_anos commodon i licia)
Texas Democratic Party		1			00015831	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jonathan Gracia	State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mihaela Plesa	State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY		A. Supported	Kristian Carranz	a State Repre	esentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	Assisted (Identify by name or, if					

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC

PURPOSE						Page 4 of 179
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Democratic Party	у				00015831	,
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Averie Bishop	State Represent		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

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				5 of 179
17 COMMITT		18 Filer ID	(Ethics Com	mission Filers)
Texas De	emocratic Party	00015831		
	E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT
1. X		\$	531,055.92	
2. X	\$	2,828.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	\$			
6.	\$			
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	688,348.32
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	322,356.19
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	2,222.30
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	125,086.54

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/52 Rpt: 6/179		
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)	
4	Date 05/31/2024			7	Amount of Contribution (\$)	\$5,000.00		
_		Somerville, MA 02144						
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)			
	Date 05/20/2024	Full name of contributor Adrian Garcia for Harris Cou Contributor address; City; State Houston, TX 77256				Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 06/06/2024	Full name of contributor Allyn, Tammy Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$15.00	
	Dringinal occu	Houston, TX 77077 pation / Job title (See Instructions)		Employer (See Instructions				
	Not Employe			N/A	,			
	Date 04/02/2024	Full name of contributor Alma A. Allen Campaign Contributor address; City; State Houston, TX 77047				Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 02/25/2024	Full name of contributor Anderson, Patricia Contributor address; City; State Apex, NC 27502	out-of-state PAC (ID#:;; Zip Code)		Amount of Contribution (\$)	\$5.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)			
			1					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/52 Rpt: 7/179			
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	Filers)		
4	Date 03/23/2024	5 Full name of contributor Anderson, Patricia6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$5.00		
8	Principal occu Not Employe	Apex, NC 27502 pation / Job title (See Instructionsed	s)	9 Employer (See Instruc N/A	tions)				
	Date 04/23/2024	Full name of contributor Anderson, Patricia Contributor address; City; S Apex, NC 27502	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00		
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instruc N/A	tions)				
	Date 05/23/2024	Full name of contributor Anderson, Patricia Contributor address; City; S	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$5.00		
	Princinal occu	Apex, NC 27502 pation / Job title (See Instructions	5)	Employer (See Instruc	tions)				
	Not Employe	,	,	N/A					
	Date 06/23/2024	Full name of contributor Anderson, Patricia Contributor address; City; S Apex, NC 27502	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00		
	Principal occu Not Employe	pation / Job title (See Instructions	s)	Employer (See Instruc N/A	tions)				
	Date 06/10/2024	Full name of contributor Angell, Marie Contributor address; City; S Baytown, TX 77520	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$25.00		
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)	Employer (See Instruc N/A	tions)				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/52 Rpt: 8/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 05/17/2024			7	Amount of Contribution (\$)	\$1,000.00
_	Deinsinal	Houston, TX 77253				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_Anonymous, Anonymous Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,668.85
	Principal occu	Everywhere, TX 12345 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Justice Warr		Mother Earth	, 		
	Date 03/13/2024	Full name of contributor out-of-state PAC (ID#:_ Averett, Nancy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00
		Wyoming, CO 45215				
	Principal occu Journalist	pation / Job title (See Instructions)	Employer (See Instructions) Self-Employed)		
	Date 04/13/2024	Full name of contributor out-of-state PAC (ID#:_Averett, Nancy Contributor address; City; State; Zip Code Wyoming, CO 45215)		Amount of Contribution (\$)	\$1.00
	Principal occu Journalist	pation / Job title (See Instructions)	Employer (See Instructions) Self-Employed)		
	Date 05/13/2024	Full name of contributor out-of-state PAC (ID#:_Averett, Nancy Contributor address; City; State; Zip Code Wyoming, CO 45215			Amount of Contribution (\$)	\$1.00
	Principal occu Journalist	upation / Job title (See Instructions)	Employer (See Instructions) Self-Employed)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/52 Rpt: 9/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 06/13/2024			7	Amount of Contribution (\$)	\$1.00
_		Wyoming, CO 45215				
8	Principal occu Journalist	ipation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_Bellows, Bambi Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00
	Dringinal occu	Chicago, IL 60625 upation / Job title (See Instructions)	Employer (See Instructions			
	Self Employe		Self-Employed) 		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_ Bergman, Eldo Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		Houston, TX 77035				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_Black, Linda Contributor address; City; State; Zip Code Woodbine, MD 21797			Amount of Contribution (\$)	\$30.00
	Principal occu Books	pation / Job title (See Instructions)	Employer (See Instructions CPB)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_Blodgett, Elaine Contributor address; City; State; Zip Code McDade, TX 78650			Amount of Contribution (\$)	\$11.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 5/52 Rpt: 10/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 03/29/2024	24 Blodgett, Elaine 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$11.00
8	Principal occu	McDade, TX 78650 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Not Employe		N/A	,		
	Date 04/29/2024	Full name of contributor out-of-state PAC (ID#:_ Blodgett, Elaine Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$11.00
		McDade, TX 78650 pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe	ed	N/A			
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Blodgett, Elaine Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$11.00
		McDade, TX 78650				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/29/2024	Full name of contributor out-of-state PAC (ID#:_ Blodgett, Elaine Contributor address; City; State; Zip Code McDade, TX 78650			Amount of Contribution (\$)	\$11.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/27/2024	Full name of contributor out-of-state PAC (ID#:_Bos, Donald Contributor address; City; State; Zip Code Austin, TX 78748			Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	pation / Job title (See Instructions) urian	Employer (See Instructions Austin Isd)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULI	E A1
	The Instruc	ction Guide explains how to comp	olete this form	n.	1	Total pages Schedule A1: Sch: 6/52 Rpt: 11/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 03/27/2024	 Full name of contributor out-of-st Bos, Donald Contributor address; City; State; Zip Coo 			7	Amount of Contribution (\$)	\$25.00
8	Principal occu School Libra	Austin, TX 78748 pation / Job title (See Instructions) rian	9	Employer (See Instructions Austin Isd	<u> </u> s)		
	Date 04/27/2024	Bos, Donald				Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	pation / Job title (See Instructions) rian		Employer (See Instructions Austin Isd	<u>(</u>		
	Date 05/27/2024	Full name of contributor out-of-st Bos, Donald Contributor address; City; State; Zip Cod	ate PAC (ID#:		•	Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	Austin, TX 78748 pation / Job title (See Instructions)		Employer (See Instructions Austin Isd	<u> </u> s)		
	Date 06/27/2024	Full name of contributor out-of-st Bos, Donald Contributor address; City; State; Zip Cod		Austinisu		Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	Austin, TX 78748 pation / Job title (See Instructions) rian		Employer (See Instructions Austin Isd	<u> </u> s)		
	Date 06/11/2024	Brennan, Laura)		Amount of Contribution (\$)	\$25.00
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	s)		
			•				

	MONET	ARY POLITICAL CON	TRIBUTIONS	5		SCHEDU	LE A1
	The Instruc	ction Guide explains how to co	omplete this form	ı.	1	Total pages Schedule A1: Sch: 7/52 Rpt: 12/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commissi 00015831	on Filers)
4	Date 03/26/2024	Broome, Christopher	o Code)	7	Amount of Contribution (\$)	\$3.12
8	Principal occu	Baltimore, MD 21218 pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Software En	gineer		Tradeswell			
	Date 06/06/2024	Full name of contributor out- Caldwell, Nathene Contributor address; City; State; Zip	o Code)		Amount of Contribution (\$)	\$15.00
		Houston, TX 77021					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 06/11/2024	Cantu, Norma Contributor address; City; State; Zip	-of-state PAC (ID#:) Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions)	1	Employer (See Instructions			
	Professor of	,		University Of Texas At A		tin	
	Date 04/02/2024	Full name of contributor out- Carol Alvarado Campaign (State Contributor address; City; State; Zip Houston, TX 77023)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/10/2024	Full name of contributor out- Cesar Blanco Campaign (State F Contributor address; City; State; Zip El Paso, TX 79926)		Amount of Contribution (\$)	\$15,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			I				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	ori	n.	1	Total pages Schedule A1: Sch: 8/52 Rpt: 13/179		
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831		
4	Date 03/29/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$6.25		
8	Principal occu Self-Employe	Austin, TX 78759 pation / Job title (See Instructions) ed	9	Employer (See Instructions Self-Employed	<u> </u> ;)			
	Date 05/28/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2,500.00		
	Principal occu	Houston, TX 77008 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	Date 05/22/2024	Full name of contributor out-of-state PAC (ID#:_ Chris Turner Campaign (State Representative) Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.00		
	Principal occu	Arlington, TX 76096 pation / Job title (See Instructions)		Employer (See Instructions	 - s)			
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Christian Menefee for Progress (County Attorney Contributor address; City; State; Zip Code Houston, TX 77021				Amount of Contribution (\$) \$5,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	Date 05/28/2024	Full name of contributor out-of-state PAC (ID#:_ Clay Jenkins Campaign Account Contributor address; City; State; Zip Code Dallas, TX 75222				Amount of Contribution (\$) \$10,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)			

	MONET	ARY POLITICAL CO	NTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this for	n.	1	Total pages Schedule A1: Sch: 9/52 Rpt: 14/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 06/13/2024	Full name of contributorCollin County Stonewall DemContributor address; City; State;			7	Amount of Contribution (\$)	\$500.00
_	Dringing Loon	Plano, TX 75025	I ₀	Employer (Con Instructions	_		
0	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	·)		
	Date 02/29/2024	Full name of contributor Cronkite, Kathy Contributor address; City; State;)		Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78763 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Not Employe			N/A	')		
	Date 03/31/2024	Full name of contributor Cronkite, Kathy Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78763					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 04/30/2024	Full name of contributor Cronkite, Kathy Contributor address; City; State; Austin, TX 78763)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 05/31/2024	Cronkite, Kathy	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			'				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDULE A1
	The Instruc	ction Guide explains how to compl	lete this forr	n.	1	Total pages Schedule A1: Sch: 10/52 Rpt: 15/179
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 06/30/2024	Cronkite, Kathy 6 Contributor address; City; State; Zip Code	e)	7	Amount of Contribution (\$) \$10.00
8	Principal occu	Austin, TX 78763 Dation / Job title (See Instructions)	9	Employer (See Instructions	 5)	
	Not Employe	d		N/A		
	Date 06/15/2024	Dasgupta, Bhaskar)		Amount of Contribution (\$) \$10.00
		Chicago, IL 60607				
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Uic	s)	
	Date 02/26/2024	Democratic Infrastructure Fund Contributor address; City; State; Zip Code	ute PAC (ID#:)		Amount of Contribution (\$) \$12,000.00
	Principal occu	Austin, TX 78763 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)	
	Date 03/18/2024	Democratic Infrastructure Fund)		Amount of Contribution (\$) \$14,416.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 04/19/2024	Full name of contributor out-of-sta Democratic Infrastructure Fund Contributor address; City; State; Zip Code Austin, TX 78763	ate PAC (ID#:)		Amount of Contribution (\$) \$7,202.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/52 Rpt: 16/179	=
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission Filers) 00015831	_
4	Date 04/29/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$38,220.0	D
_		Austin, TX 78763				_
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/20/2024	Full name of contributor out-of-state PAC (ID#:_ Democratic Infrastructure Fund Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$19,145.0	0
	Principal occu	Austin, TX 78763 pation / Job title (See Instructions)	Employer (See Instructions)		_
	Date 06/18/2024	Full name of contributor out-of-state PAC (ID#: Deutsch, Barry Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2.7	8
	Principal occu	Portland, OR 97266 pation / Job title (See Instructions)	Employer (See Instructions			_
	Cartoonist	pation 7 oob title (oce monucions)	Self-Employed			
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#: Devore, Michael Contributor address; City; State; Zip Code Naperville, IL 60540)		Amount of Contribution (\$) \$5.5	5
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_ Dobelle, Martin Contributor address; City; State; Zip Code Washington, DC 20002)		Amount of Contribution (\$) \$2,500.0	0
	Principal occu Partner	pation / Job title (See Instructions)	Employer (See Instructions Athena Public Affairs)		_

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/52 Rpt: 17/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 04/29/2024	 Full name of contributor out-of-state PAC (ID#:_Donna Howard For State House District 48 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5,000.00
•	Dringing occu	Austin, TX 78749	Employer (See Instructions)			
8	Рппсіраї осси	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Einhorn, Stephen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Harker Heights, TX 76548 upation / Job title (See Instructions)	Employer (See Instructions))		
	Not Employe	ed	N/A			
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_ Ellis, Rodney Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77005				
	Principal occu Commission	pation / Job title (See Instructions) er	Employer (See Instructions) Harris County)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_Evans, Carol Contributor address; City; State; Zip Code Glen Rose, TX 76043			Amount of Contribution (\$)	\$25.00
	Principal occu Nurse Educa	ipation / Job title (See Instructions) ator	Employer (See Instructions) Tarleton State University			
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_ Evans, Carol Contributor address; City; State; Zip Code Glen Rose, TX 76043			Amount of Contribution (\$)	\$25.00
	Principal occu Nurse Educa	pation / Job title (See Instructions) ator	Employer (See Instructions) Tarleton State University			
			,			

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 13/52 Rpt: 18/179	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 04/29/2024	5 Full name of contributor Evans, Carol6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$25.00
		Glen Rose, TX 76043					
8	Principal occu Nurse Educa	pation / Job title (See Instructions) ator		Employer (See Instructions Tarleton State University			
	Date 05/29/2024	Full name of contributor Evans, Carol Contributor address; City; State				Amount of Contribution (\$)	\$25.00
	Principal occu	Glen Rose, TX 76043 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Nurse Educator			Tarleton State University			
	Date 06/29/2024	Full name of contributor Evans, Carol Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$25.00
		Glen Rose, TX 76043					
	Principal occu Nurse Educa	pation / Job title (See Instructions) ator		Employer (See Instructions Tarleton State University			
	Date 05/28/2024	Full name of contributor Evelina Ortega Campaign Contributor address; City; State El Paso, TX 79901)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/25/2024	Full name of contributor Fomel, Sergey Contributor address; City; State Austin, TX 78759	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$3.57
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions The University of Texas		Austin	
	. 10103001			The enversity of Texas	, 11	, would	

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 14/52 Rpt: 19/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 04/09/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Arlington, TX 76016 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe	d		N/A			
	Date 06/28/2024	Full name of contributor out-of-state PAC Gaupp, Peter Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
		Arlington, TX 76016					
	Principal occur Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)		
				IN/A	_		
	Date 06/28/2024	Full name of contributor out-of-state PAC Gentile, Ann Contributor address; City; State; Zip Code	(ID#			Amount of Contribution (\$)	\$50.00
		Albuquerque, NM 87191					
	Principal occu Scientist	pation / Job title (See Instructions)		Employer (See Instructions Sandia National Labora		es	
	Date 05/24/2024	Full name of contributor out-of-state PAC Goldin, John Contributor address; City; State; Zip Code Guilford, CT 06437)	-	Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions N/A	5)		
	Date 06/06/2024	Full name of contributor out-of-state PAC Greve, Carol Contributor address; City; State; Zip Code Kingwood, TX 77339			•	Amount of Contribution (\$)	\$10.11
	Principal occu Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions N/A	s)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/52 Rpt: 20/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 02/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Hangs, George 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
_		Tulsa, OK 74152				
8	Principal occu Manager	ipation / Job title (See Instructions)	9 Employer (See Instructions)Harmon FND)		
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_ Hangs, George Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Tulsa, OK 74152				
	Manager	ipation / Job title (See Instructions)	Employer (See Instructions) Harmon FND)		
	Date 04/28/2024	Full name of contributor out-of-state PAC (ID#:_ Hangs, George Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Tulsa, OK 74152				
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions Harmon FND)		
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Hangs, George Contributor address; City; State; Zip Code Tulsa, OK 74152			Amount of Contribution (\$)	\$50.00
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions Harmon FND)		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#:_ Hangs, George Contributor address; City; State; Zip Code Tulsa, OK 74152			Amount of Contribution (\$)	\$50.00
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions Harmon FND)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/52 Rpt: 21/179	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
	Texas Demo	ocratic Party			00015831	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/11/2024	Harris County Democratic Party	County Democratic Party			\$10,500.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77020				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	04/29/2024	Heriberto Eddie Morales Campaign				\$5,000.00
		Contributor address; City; State; Zip Code		•		
		Eagle Pass, TX 78852				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	02/25/2024	Hollis, Colin				\$15.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78757				
	Principal occu Non Profit D	pation / Job title (See Instructions) irector	Employer (See Instructions lcut	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	03/15/2024	Hollis, Colin)		γ another of Continuation (ψ)	\$15.00
		Contributor address; City; State; Zip Code		┨		,
		Contributor address, Sity, State, 21p code				
		Austin, TX 78757				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Non Profit D	irector	lcut			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	04/15/2024	Hollis, Colin				\$15.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78757				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Non Profit D	irector	lcut			

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 17/52 Rpt: 22/179
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 05/15/2024	 Full name of contributor			7	Amount of Contribution (\$) \$15.00
•	Dringinal occu	Austin, TX 78757	ام	Employer (See Instructions	·/-	
0	Non Profit Di	pation / Job title (See Instructions) irector	ľ	Employer (See Instructions lcut	·)	
	Date 06/15/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$15.00
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	Т	Employer (See Instructions	<u> </u>	
	Non Profit Di	irector		Icut		
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID# Holly Eileen Taylor Public Campaign Fund Contributor address; City; State; Zip Code	:		•	Amount of Contribution (\$) \$2,500.00
		Austin, TX 78705				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Date 03/13/2024	Full name of contributor out-of-state PAC (ID# House Democratic Campaign Committee Contributor address; City; State; Zip Code Austin, TX 78767)	•	Amount of Contribution (\$) \$15,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 03/25/2024	Full name of contributor out-of-state PAC (ID# House Democratic Campaign Committee Contributor address; City; State; Zip Code Austin, TX 78767	:			Amount of Contribution (\$) \$14,850.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
			<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/52 Rpt: 23/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 05/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$2	23,025.00
_		Austin, TX 78767				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 04/12/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$:	19,575.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$2	20,576.72
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions)		
	•					
	Date 05/28/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$3	13,025.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/28/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code Austin, TX 78767)		Amount of Contribution (\$) \$2	10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/52 Rpt: 24/179
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 06/13/2024	Full name of contributor)	7	Amount of Contribution (\$) \$23,259.00
_		Austin, TX 78767			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$19,675.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 06/28/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,900.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions)	
			, , ,	_	
	Date 03/04/2024	Full name of contributor out-of-state PAC (ID#: Jannise, Nalton Contributor address; City; State; Zip Code Glenn Heights, TX 75154			Amount of Contribution (\$) \$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)	
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Jannise, Nalton Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/52 Rpt: 25/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 05/02/2024	 5 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
8		Glenn Heights, TX 75154 pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Not Employe		N/A			
	Date 04/29/2024	Full name of contributor out-of-state PAC (ID#:_ Jessica Gonzalez For Texas House District 104 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75203				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Johansen, Roberta Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2.00
		Bartlesville, OK 74003				
	Principal occu Pca	pation / Job title (See Instructions)	Employer (See Instructions) Healthcare Innovations)		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#:_ Johansen, Roberta Contributor address; City; State; Zip Code Bartlesville, OK 74003			Amount of Contribution (\$)	\$2.00
	Principal occu Pca	pation / Job title (See Instructions)	Employer (See Instructions) Healthcare Innovations)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Johansen, Roberta Contributor address; City; State; Zip Code Bartlesville, OK 74003			Amount of Contribution (\$)	\$2.00
	Principal occu Pca	pation / Job title (See Instructions)	Employer (See Instructions) Healthcare Innovations)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 21/52 Rpt: 26/179		
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831		
4	Date 05/23/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$2.00		
_		Bartlesville, OK 74003	_					
8	Principal occu Pca	pation / Job title (See Instructions)	9	Employer (See Instructions Healthcare Innovations	5)			
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Johansen, Roberta Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2.00		
	Principal occu	Bartlesville, OK 74003 pation / Job title (See Instructions)		Employer (See Instructions	 ;)			
	Pca	, ,		Healthcare Innovations	•			
	Date 06/10/2024	Full name of contributor)		Amount of Contribution (\$) \$200.00		
		Dallas, TX 75214						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)			
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ John Bucy Campaign Contributor address; City; State; Zip Code Austin, TX 78767)		Amount of Contribution (\$) \$500.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ John Bucy Campaign (State Representative) Contributor address; City; State; Zip Code Austin, TX 78723)		Amount of Contribution (\$) \$10,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
		•						

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 22/52 Rpt: 27/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 06/27/2024	5 Full name of contributor out-of-state PAC (ID#:) Joiner, David 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Justin, TX 76247 pation / Job title (See Instructions)	9 Employer (See Instructions)		
_	Not Employe		N/A	,		
	Date 05/13/2024	Full name of contributor out-of-state PAC (ID#:_ Juan Chuy Hinojosa Texas Senate Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Deinsinal assu	Edinburg, TX 78539	Franksian (Cas Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Judith Zaffirini Senate Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Laredo, TX 78042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:_KP George Campaign Contributor address; City; State; Zip Code Sugar Land, TX 77496			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/26/2024	Full name of contributor out-of-state PAC (ID#:_Kaempfer, Joseph Contributor address; City; State; Zip Code McLean, VA 22101			Amount of Contribution (\$)	\$1,325.00
	Principal occu Developer	pation / Job title (See Instructions)	Employer (See Instructions McArthur Glen Group)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 23/52 Rpt: 28/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 05/31/2024	 Full name of contributor out-of-state PAC (ID#: Kirby, Susan Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
0	Dringing occu	Austin, TX 78748	Employer (See Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_Kirby, Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78748 upation / Job title (See Instructions)	Employer (See Instructions N/A	<u> </u> 5)		
	Date 03/04/2024	Full name of contributor out-of-state PAC (ID#:_Lesky, Cynthia Contributor address; City; State; Zip Code Austin, TX 78731			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/04/2024	Full name of contributor out-of-state PAC (ID#:_ Lesky, Cynthia Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78731 Ipation / Job title (See Instructions) ed	Employer (See Instructions N/A	<u> </u> 5)		
	Date 05/04/2024	Full name of contributor out-of-state PAC (ID#:_Lesky, Cynthia			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDU	SCHEDULE A1	
	The Instru	ction Guide explains how to c	omplete this forn	n.	1	Total pages Schedule A1: Sch: 24/52 Rpt: 29/179		
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commissi 00015831	ion Filers)	
4	Date 06/04/2024	Lesky, Cynthia 6 Contributor address; City; State; Zi	t-of-state PAC (ID#: p Code)	7	Amount of Contribution (\$)	\$25.00	
8		pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 06/10/2024	Full name of contributor ou Levy, Alene Contributor address; City; State; Zi	it-of-state PAC (ID#:	N/A		Amount of Contribution (\$)	\$10.00	
	Principal occu Attorney	Pation / Job title (See Instructions)		Employer (See Instructions Self-Employed)			
	Date 05/11/2024	Full name of contributor ou Lipnicky, David Contributor address; City; State; Zij Grand Prairie, TX 75050	rt-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$9.00	
	•	pation / Job title (See Instructions) t & Program Analyst		Employer (See Instructions U.S. Dept. of Labor)			
	Date 06/11/2024	Full name of contributor ou Lipnicky, David Contributor address; City; State; Zij Grand Prairie, TX 75050	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$5.00	
	•	pation / Job title (See Instructions) t & Program Analyst		Employer (See Instructions U.S. Dept. of Labor)			
	Date 06/03/2024	Full name of contributor ou Loeb, Margery Contributor address; City; State; Zij Houston, TX 77027				Amount of Contribution (\$)	\$10,000.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)			
			1					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this 1	form.	1	Total pages Schedule A1: Sch: 25/52 Rpt: 30/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 06/20/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	9 Employer (See Instructions			
_	Not Employe		N/A	,		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_Lyerly, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Lahaina, HI 96761 pation / Job title (See Instructions)	Employer (See Instructions			
	Not Employe		N/A	,		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#:_ Lyerly, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Lahaina, HI 96761				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Lyerly, Linda Contributor address; City; State; Zip Code Lahaina, HI 96761			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_Lyerly, Linda Contributor address; City; State; Zip Code Lahaina, HI 96761			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 26/52 Rpt: 31/179	
2	FILER NAME Texas Demo	ocratic Party				3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 06/23/2024	5 Full name of contributor Lyerly, Linda6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Lahaina, HI 96761 pation / Job title (See Instructions) [9	9	Employer (See Instructions	 s)		
	Not Employe	ed			N/A			
	Date 05/16/2024	Full name of contributor Manohar, Vimal Contributor address; City; St Baltimore, MD 21201)	•	Amount of Contribution (\$)	\$6.25
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Software Eng	gg			Meta			
	Date 05/22/2024	Full name of contributor Marlowe, Thomas Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$3.00
		Rahway, NJ 07065						
	Principal occu Professor Er	pation / Job title (See Instructions neritus)		Employer (See Instructions Seton Hall University	s)		
	Date 06/11/2024	Full name of contributor Mbachu, Frank Contributor address; City; St Sugar Land, TX 77479	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Engineering	pation / Job title (See Instructions			Employer (See Instructions FCM Engineers PC	5)		
	Date 03/30/2024	Full name of contributor Mirkovic, Nena Contributor address; City; St Conroe, TX 77385	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$12.50
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Millennium Physicians	5)		
	, σισιαι		l					

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDULE	A1
	The Instruc	ction Guide explains how to c	complete this forr	n.	1	Total pages Schedule A1: Sch: 27/52 Rpt: 32/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 02/25/2024	Montero, Pilar	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$7.00
8	Principal occur	Sausalito, CA 94965 pation / Job title (See Instructions)	ام	Employer (See Instructions	·/		
0	Not Employe		9	N/A))		
	Date 03/23/2024	Full name of contributor on Montero, Pilar Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$7.00
	Dringing conu	Sausalito, CA 94965		Employer (See Instructions	<u>, </u>		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	·)		
	Date 04/23/2024	Full name of contributor on Montero, Pilar Contributor address; City; State; Z	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$7.00
		Sausalito, CA 94965					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 05/23/2024	Full name of contributor on Montero, Pilar Contributor address; City; State; Z Sausalito, CA 94965				Amount of Contribution (\$)	\$7.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 06/23/2024	Full name of contributor on Montero, Pilar Contributor address; City; State; Z Sausalito, CA 94965	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$7.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			I				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 28/52 Rpt: 33/179		
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)	
4	Date 02/25/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)	7	Amount of Contribution (\$)	\$10.00	
8	Principal occu	Pacifica, CA 94044 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)			
	Date 03/02/2024	Full name of contributor Murray, Ryan Contributor address; City; Sta		N/A		Amount of Contribution (\$)	\$25.00	
	Principal occur	Boca Raton, FL 33487 pation / Job title (See Instructions)		Employer (See Instructions) 			
	Data Analytic			Bre Hotels & Resorts	,			
	Date 02/25/2024	Full name of contributor Nadeau, Stephanie Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code			Amount of Contribution (\$)	\$100.00	
		Kennebunkport, ME 04046						
	Principal occu Fish Dealer	pation / Job title (See Instructions)		Employer (See Instructions Smfisheries	5)			
	Date 06/06/2024	Full name of contributor Narcisse, Jude Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)		Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
	Date 06/10/2024	Full name of contributor Nathan Johnson Campaign Contributor address; City; Sta Dallas, TX 75230)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 29/52 Rpt: 34/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 06/03/2024	5 Full name of contributor Nirenberg, Ronald6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)	7	Amount of Contribution (\$)	\$2,500.00
_		San Antonio, TX 78212					
8	Principal occu Mayor	pation / Job title (See Instructions)		Employer (See Instructions City of San Antonio)		
	Date 05/03/2024	Full name of contributor Nixon, Arlene Contributor address; City; State Richmond, TX 77469	out-of-state PAC (ID#: ; Zip Code			Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe	ed		N/A			
	Date 06/07/2024	Full name of contributor Olson Jr., Lyndon Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$5,000.00
		Waco, TX 76710					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 06/20/2024	Full name of contributor One Texas Political Committe Contributor address; City; State San Antonio, TX 78205				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 04/06/2024	Full name of contributor Perry, Sylvia Contributor address; City; State Austin, TX 78752	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$1.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 30/52 Rpt: 35/179		
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)	
4	Date 03/16/2024	5 Full name of contributor Peterson, Joshua6 Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5.00	
8	Principal occu	Lewisville, TX 75057 pation / Job title (See Instructions) 9	Employer (See Instructions	 - S)			
	Cash Logisti	CS		Brinks				
	Date 04/16/2024	Full name of contributor Peterson, Joshua Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00	
	Principal occu	Lewisville, TX 75057 pation / Job title (See Instructions))	Employer (See Instructions	s) 			
	Cash Logisti		,	Brinks	٠,			
	Date 05/16/2024	Full name of contributor Peterson, Joshua Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00	
		Lewisville, TX 75057						
	Principal occu Cash Logisti	pation / Job title (See Instructions))	Employer (See Instructions Brinks	5)			
	Date 06/16/2024	Full name of contributor Peterson, Joshua Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00	
	Principal occu Cash Logisti	pation / Job title (See Instructions))	Employer (See Instructions Brinks	5)			
	Date 06/10/2024	Full name of contributor Philip Cortez Campaign (S Contributor address; City; Sta)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to c	complete this forn	1.	1	Total pages Schedule A1: Sch: 31/52 Rpt: 36/179		
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831		
4	Date 06/30/2024	Full name of contributor oPita, AidaContributor address; City; State; ZKaty, TX 77450)	7	Amount of Contribution (\$) \$10.00		
8	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)			
	Date 04/09/2024	Full name of contributor of Planned Parenthood Texas Volume Contributor address; City; State; Z				Amount of Contribution (\$) \$2,250.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 05/30/2024	Powered by People Contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$10,000.00		
	Principal occu	El Paso, TX 79923 pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 04/09/2024	Full name of contributor on one of contributor of contributor address; City; State; Zity; Austin, TX 78763	out-of-state PAC (ID#:			Amount of Contribution (\$) \$2,250.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 02/25/2024	Raschke, Donald	out-of-state PAC (ID#:			Amount of Contribution (\$) \$65.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)			
			•					

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/52 Rpt: 37/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 03/26/2024	 Full name of contributor out-of-state PAC (ID#:_Raschke, Donald Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$65.00
_	Deinsinal	Brenham, TX 77833	lo Familiary (October 1997)			
8	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired			
	Date 04/25/2024	Full name of contributor out-of-state PAC (ID#:_Raschke, Donald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$65.00
	Principal occu	Brenham, TX 77833 pation / Job title (See Instructions)	Employer (See Instructions	7		
	Retired	pation 7 300 title (See Instructions)	Retired	')		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Raschke, Donald Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$65.00
		Brenham, TX 77833				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	i)		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#:_Raschke, Donald Contributor address; City; State; Zip Code Brenham, TX 77833			Amount of Contribution (\$)	\$65.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 03/22/2024	Full name of contributor out-of-state PAC (ID#:_Ray, Richard Contributor address; City; State; Zip Code Mitchellville, MD 20721			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL (SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 33/52 Rpt: 38/179
2	FILER NAME Texas Demo	cratic Party				3	Filer ID (Ethics Commission Filers) 00015831
4	Date 06/06/2024	6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$10.11
8		Houston, TX 77059 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> S)	
	Not Employe Date 04/05/2024	Full name of contributor Richard Pena Raymond C Contributor address; City; St Laredo, TX 78045			N/A		Amount of Contribution (\$) \$15,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> S)	
	Date 03/13/2024	Full name of contributor Roberts-Miller, Jimmy Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$) \$100.00
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)		Employer (See Instructions	 s)	
	Not Employe	ed			N/A		
	Date 04/13/2024	Full name of contributor Roberts-Miller, Jimmy Contributor address; City; St Austin, TX 78757)		Amount of Contribution (\$) \$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)	
	Date 05/13/2024	Full name of contributor Roberts-Miller, Jimmy Contributor address; City; Si Austin, TX 78757	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$) \$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)	

	MONET	ARY POLITICAL C	SCHEDULE A1				
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 34/52 Rpt: 39/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 06/02/2024	6 Contributor address; City; Stat	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$55.55
8	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	9	Employer (See Instructions	 ;)		
	Not Employe	d		N/A			
	Date 06/13/2024	Full name of contributor Roberts-Miller, Jimmy Contributor address; City; Stat				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe	d		N/A			
	Date 03/18/2024	Full name of contributor [Rohde, Carl Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1.00
	Dringing con	Washington, DC 20001 pation / Job title (See Instructions)		Employer (Coo Instructions	<u></u>		
	Courtroom C	,		Employer (See Instructions DC Superior Courts)		
	Date 04/18/2024	Full name of contributor Rohde, Carl Contributor address; City; Stat Washington, DC 20001	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1.00
	Principal occu Courtroom C	pation / Job title (See Instructions)		Employer (See Instructions DC Superior Courts	<u> </u> 		
	Date 05/18/2024	Full name of contributor Rohde, Carl Contributor address; City; Stat Washington, DC 20001	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1.00
	Principal occu Courtroom C	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Courtiouin	ICIN		DC Superior Courts			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 35/52 Rpt: 40/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 06/18/2024	 Full name of contributor out-of-state PAC (ID# Rohde, Carl Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$1.00
_		Washington, DC 20001	1_				
8	Principal occu Courtroom C	pation / Job title (See Instructions) lerk	9	Employer (See Instructions DC Superior Courts	5)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID# Ross, Kel Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5.00
	Principal occu	Fort Worth, TX 76140 pation / Job title (See Instructions)		Employer (See Instructions	<u>''</u>		
	Nurse	pation / Job title (See Instructions)		Ceris	·)		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID# Ross, Kel Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$5.00
		Fort Worth, TX 76140					
	Principal occu Nurse	pation / Job title (See Instructions)		Employer (See Instructions Ceris	5)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID# Ross, Kel Contributor address; City; State; Zip Code Fort Worth, TX 76140)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Nurse	pation / Job title (See Instructions)		Employer (See Instructions Ceris	5)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#Ross, Kel Contributor address; City; State; Zip Code Fort Worth, TX 76140)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Nurse	pation / Job title (See Instructions)		Employer (See Instructions Ceris	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULI	■ A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/52 Rpt: 41/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 06/23/2024	 Full name of contributor out-of-state PAC (ID#:_Ross, Kel Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Fort Worth, TX 76140 pation / Job title (See Instructions)	9 Employer (See Instructions	(s)		
	Nurse	,	Ceris			
	Date 03/11/2024	Full name of contributor out-of-state PAC (ID#:_Ross, Tom Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Deinsinal assu	Sterling Heights, MI 48312	Franksian (Coo Instructions	<u></u>		
	Managemen	pation / Job title (See Instructions) It	Employer (See Instructions Vmware	5)		
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ross, Tom Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Sterling Heights, MI 48312				
	Principal occu Managemen	pation / Job title (See Instructions) It	Employer (See Instructions Vmware	5)		
	Date 05/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ross, Tom Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Sterling Heights, MI 48312 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Managemen		Vmware			
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ross, Tom Contributor address; City; State; Zip Code Sterling Heights, MI 48312			Amount of Contribution (\$)	\$10.00
	Principal occu Managemen	pation / Job title (See Instructions)	Employer (See Instructions Vmware	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/52 Rpt: 42/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 03/19/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75203				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Ryan, Teresa Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Dringing! goog	Jersey City, NJ 07302	Employer (Con Instructions			
	Professor	pation / Job title (See Instructions)	Employer (See Instructions Kean U) 		
	Date 03/23/2024	Full name of contributor)		Amount of Contribution (\$)	\$5.00
		Jersey City, NJ 07302				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Kean U)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_Ryan, Teresa Contributor address; City; State; Zip Code Jersey City, NJ 07302)		Amount of Contribution (\$)	\$5.00
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Kean U)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_Saldana, Rena Contributor address; City; State; Zip Code Houston, TX 77004			Amount of Contribution (\$)	\$3.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 38/52 Rpt: 43/179			
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)		
4	Date 06/03/2024	 Full name of contributor out-of-state PAC (ID#: Sarah Eckhardt Campaign (State Senate) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5,000.00		
8	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	9 Employer (See Instructions					
•	Principal occu	pation / Job title (See Instructions)	B Employer (See Instructions)				
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_ Schafer, Margaret Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.11		
	Principal occu	Houston, TX 77082 pation / Job title (See Instructions)	Employer (See Instructions)				
	Not Employe		N/A	,				
	Date 05/05/2024	Full name of contributor out-of-state PAC (ID#:_Schindler, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.12		
		St Charles, MO 63304						
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)				
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Schroeder, Robert Contributor address; City; State; Zip Code San Francisco, CA 94107			Amount of Contribution (\$)	\$5.00		
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)				
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#:_Schroeder, Robert Contributor address; City; State; Zip Code San Francisco, CA 94107			Amount of Contribution (\$)	\$5.00		
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 39/52 Rpt: 44/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 04/23/2024	 Full name of contributor out-of-state PAC (ID#: Schroeder, Robert Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	San Francisco, CA 94107 pation / Job title (See Instructions)	9 Employer (See Instructions			
•	Not Employe		N/A	')		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_Schroeder, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	San Francisco, CA 94107 pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>		
	Not Employe		N/A	')		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_Schroeder, Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		San Francisco, CA 94107				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	i)		
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_Schwartz, Dennis Contributor address; City; State; Zip Code McKinney, TX 75069			Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date 03/08/2024	Full name of contributor out-of-state PAC (ID#:_Schwartz, Dennis Contributor address; City; State; Zip Code McKinney, TX 75069)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/52 Rpt: 45/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 04/26/2024	 Full name of contributor out-of-state PAC (ID#:_ Seaberg, Karmyn Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
_	Dringing	Amarillo, TX 79109	D. Frankrian (Contractive times			
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/26/2024	Full name of contributor out-of-state PAC (ID#:_ Seaberg, Karmyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Amarillo, TX 79109 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation 7 300 title (See Instructions)	Retired	,		
	Date 03/09/2024	Full name of contributor out-of-state PAC (ID#:_ Sims, Delaina Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Wills Point, TX 75169				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 04/09/2024	Full name of contributor out-of-state PAC (ID#:_Sims, Delaina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	wills Point, TX 75169 pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_Sims, Delaina Contributor address; City; State; Zip Code Wills Point, TX 75169)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CONTRIB	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 41/52 Rpt: 46/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 06/09/2024	 5 Full name of contributor out-of-state P/Sims, Delaina 6 Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$10.00
8	Principal occu Not Employe	Wills Point, TX 75169 pation / Job title (See Instructions) d	9	Employer (See Instructions N/A	<u> </u> s)		
	Date 03/01/2024	Full name of contributor out-of-state Passmith, Ralph Contributor address; City; State; Zip Code Friendswood, TX 77546)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>l</u> s)		
	Date 02/29/2024	Full name of contributor out-of-state Proceedings of the Smith, T. Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	Houston, TX 77084 pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 03/30/2024	Full name of contributor out-of-state Pr)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>l</u> S)		
	Date 04/30/2024	Full name of contributor out-of-state Prosection out-o				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CON		SCHEDULE A1			
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 42/52 Rpt: 47/179	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 05/30/2024	5 Full name of contributor o)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Houston, TX 77084 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
	Not Employe			N/A	,		
	Date 06/30/2024	Smith, T. Contributor address; City; State; Z	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77084 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe			N/A	,		
	Date 06/07/2024	Full name of contributor of contributor of contributor address; City; State; Z	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$2.00
		Houston, TX 77008					
	Principal occu Not Employe	pation / Job title (See Instructions) rd		Employer (See Instructions N/A	s)		
	Date 06/06/2024	Full name of contributor of contributor of contributor address; City; State; Zity;	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 02/25/2024	Full name of contributor of contributor of contributor contributor address; City; State; Zity; Cypress, TX 77433	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Registered N	pation / Job title (See Instructions) Iurse		Employer (See Instructions Hca	5)		
			I				

	MONET	ONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 43/52 Rpt: 48/179		
2	FILER NAME Texas Demo	cratic Party				3	Filer ID (Ethics Commission 00015831	Filers)	
4	Date 03/23/2024	5 Full name of contributor Stringfellow, Chris6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$5.00	
8	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>			
	Registered N				Hca	,			
	Date 04/23/2024	Full name of contributor Stringfellow, Chris Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5.00	
		Cypress, TX 77433							
	Principal occupation / Job title (See Instructions) Registered Nurse)		Employer (See Instructions	s)			
					Hca	_	Amount of Contribution (\$)		
	05/23/2024	Stringfellow, Chris Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Continuation (4)	\$5.00	
		Cypress, TX 77433							
	Principal occu Registered N	pation / Job title (See Instructions lurse			Employer (See Instructions	5)			
Date Full name of contributor 03/12/2024 Stromsness, Rune Contributor address; City			out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$3.57	
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions University of California	<u>I</u> S)			
	Date 04/06/2024	Full name of contributor Stromsness, Rune Contributor address; City; St Oakland, CA 94607	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$3.12	
		pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Manager				University of California				

MONETARY POLITICAL CONTRIBUTIONS				LE A1			
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 44/52 Rpt: 49/179			
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 06/04/2024			7	Amount of Contribution (\$)	\$8.33	
_		Oakland, CA 94607	<u> </u>				
8	Principal occu Manager	pation / Job title (See Instructions)	9	Employer (See Instructions University of California)		
	Date Full name of contributor out-of-state PAC (ID#:) 1 Taylor, Duncan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.57		
	Principal occu	Bryan, TX 77803 pation / Job title (See Instructions)		Employer (See Instructions)		
Not Employed N/A		•					
	Date Full name of contributor out-of-state PAC (ID#:) 05/16/2024 Taylor, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00		
		Delmar, NY 12054					
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Albany)		
	Date 05/28/2024	Full name of contributor out-of Tejano Democrats PDN PAC Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) Tevebaugh, Mary Lou Contributor address; City; State; Zip Code Longview, TX 75605			Amount of Contribution (\$)	\$5,000.00		
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed)		
			•				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 45/52 Rpt: 50/179
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 05/13/2024			7	Amount of Contribution (\$) \$2,500.00	
_		Bullard, TX 75757	1-		Ĺ	
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions TDW	5)	
	Date 05/13/2024	Full name of contributor out-of-state PAC (ID#: Texas Democratic Women PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.00
		Bullard, TX 75757				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions TDW	5)	
	Date 05/31/2024	Full name of contributor out-of-state PAC (ID#: Texas Friends of Trey Martinez Fischer Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$5,000.00
	Dein sin al a a a a	San Antonio, TX 78201	_	Frankrije (Ozakativati	<u></u>	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#: Texas Majority PAC Contributor address; City; State; Zip Code Houston, TX 77260)		Amount of Contribution (\$) \$25,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>	
	Date 03/19/2024	Full name of contributor out-of-state PAC (ID#: Texas Progressive Caucus Contributor address; City; State; Zip Code Lampasas, TX 76550)		Amount of Contribution (\$) \$2,250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
			<u> </u>			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/52 Rpt: 51/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 03/19/2024			7	Amount of Contribution (\$)	\$5,000.00
_	Deinsinal	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 02/27/2024	Full name of contributor out-of-state PAC (ID#:_ Thaden, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Dein sin al a ser	College Station, TX 77845	Faralassa (Caralastastica)			
	Scientist	pation / Job title (See Instructions)	Employer (See Instructions) Texas A&m University)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/27/2024 Thaden, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00	
		College Station, TX 77845				
	Principal occu Scientist	pation / Job title (See Instructions)	Employer (See Instructions) Texas A&m University)		
	Date 04/27/2024	Full name of contributor out-of-state PAC (ID#:_ Thaden, John Contributor address; City; State; Zip Code College Station, TX 77845			Amount of Contribution (\$)	\$15.00
	Principal occu Scientist	pation / Job title (See Instructions)	Employer (See Instructions Texas A&m University)		
	Date 05/27/2024	Full name of contributor out-of-state PAC (ID#:_ Thaden, John Contributor address; City; State; Zip Code College Station, TX 77845			Amount of Contribution (\$)	\$15.00
	Principal occu Scientist	pation / Job title (See Instructions)	Employer (See Instructions) Texas A&m University)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 47/52 Rpt: 52/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4			7	Amount of Contribution (\$)	\$15.00	
_		College Station, TX 77845				
8	Scientist	ipation / Job title (See Instructions)	9 Employer (See Instructions) Texas A&m University)		
Date Full name of contributor out-of-state PAC (ID#:) 06/25/2024 Thompson, Donald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$7.50		
Houston, TX 77045 Principal occupation / Job title (See Instructions) Employer (See Instruction		Employer (See Instructions)			
Not Employed N/A						
	Date Full name of contributor out-of-state PAC (ID#:) 03/02/2024 Thompson, Gregory Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
		Bedford, VA 24523				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Gregory Contributor address; City; State; Zip Code Bedford, VA 24523			Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/02/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Gregory Contributor address; City; State; Zip Code Bedford, VA 24523)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 48/52 Rpt: 53/179
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 06/02/2024			7	Amount of Contribution (\$) \$10.00
_		Bedford, VA 24523	I		
8	Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired)	
	Date 05/17/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Senfronia Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$20,000.00
	Principal occu	Houston, TX 77081 upation / Job title (See Instructions)	Employer (See Instructions)	
	Attorney	,	Self-Employed		
	Date 06/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tucker, Wendy Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$25.00
		Toluca Lake, CA 91602			
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)	
	Date 04/16/2024	Full name of contributor out-of-state PAC (ID#:_ Tull, Leslie Contributor address; City; State; Zip Code Austin, TX 78731			Amount of Contribution (\$) \$200.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)	
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Tyler, HL Contributor address; City; State; Zip Code Boerne, TX 78006			Amount of Contribution (\$) \$3.57
	Principal occu Caregiving C	upation / Job title (See Instructions) Consultant	Employer (See Instructions Self-Employed)	

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 49/52 Rpt: 54/179	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commissi 00015831	ion Filers)
4	Date 03/26/2024 5 Full name of contributor out-of-state PAC (ID#:) 7 Tyler, HL 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$3.57		
_	Delicational	Boerne, TX 78006		Faralassa (Ossalastassáis as	$\overline{\Gamma}$		
8	Caregiving C	pation / Job title (See Instructions Consultant	9	Employer (See Instructions Self-Employed	5)		
	Date 04/25/2024	Full name of contributor Tyler, HL Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$3.57
	Principal occur	Boerne, TX 78006		Employer (See Instructions	·/-		
Principal occupation / Job title (See Instructions) Caregiving Consultant Employer (See Instructions Self-Employed)					
	Date Full name of contributor out-of-state PAC (ID#:) 04/30/2024 Van Hooser, Philip Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$23.00		
		Charlotte, NC 28205					
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions Retired	5)		
	Date 05/28/2024	Full name of contributor Venton for Texas Contributor address; City; Sta Dallas, TX 75216	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/19/2024 Vikki Goodwin, Campaign Contributor address; City; State; Zip Code Austin, TX 78748			Amount of Contribution (\$)	\$10,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			.				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/52 Rpt: 55/179	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	n Filers)
4	Date 06/11/2024	5 Full name of contributor out-of-state PAC (ID#:_ Vinson, Sherry 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$200.00
_	Deignaignal annu	Houston, TX 77096	D. Frankrian (Co. Lastrostina			
8	physician	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/11/2024 Vinson Jr., Tommy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
	Principal occu	Houston, TX 77096 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Retired)		
	Date 06/10/2024	Full name of contributor out-of-state PAC (ID#:_ WCDP PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Georgetown, TX 78627				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/05/2024	Full name of contributor out-of-state PAC (ID#:_ Wang, Xiaoying Contributor address; City; State; Zip Code Cardiff By The Sea, CA 92007			Amount of Contribution (\$)	\$2.14
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 06/07/2024	Full name of contributor out-of-state PAC (ID#:_ Ware, Janice Contributor address; City; State; Zip Code Houston, TX 77004			Amount of Contribution (\$)	\$10.11
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this fo	ori	n.	1	Total pages Schedule A1: Sch: 51/52 Rpt: 56/179	
2	FILER NAME Texas Demo	cratic Party				3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 03/11/2024	5 Full name of contributor Wheeler, Carol6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Katy, TX 77450 pation / Job title (See Instructions	<u>)</u>	9	Employer (See Instructions	s)		
•	Not Employe		,	•	N/A	-,		
	Date 04/11/2024	Full name of contributor Wheeler, Carol Contributor address; City; St)		Amount of Contribution (\$)	\$10.00
	Katy, TX 77450 Principal occupation / Job title (See Instructions) Employer (See Instructions)		<u> </u> s)					
Not Employed N/A		•						
	Date Full name of contributor out-of-state PAC (ID#:) 05/11/2024 Wheeler, Carol Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$10.00			
		Katy, TX 77450						
	Principal occup Not Employe	pation / Job title (See Instructions d)		Employer (See Instructions N/A	5)		
	Date 06/11/2024	Full name of contributor Wheeler, Carol Contributor address; City; St Katy, TX 77450)	-	Amount of Contribution (\$)	\$10.00
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>s)</u>		
	Date Full name of contributor out-of-state PAC (ID#:) 02/25/2024 Xeros, Peter Contributor address; City; State; Zip Code Burr Ridge, IL 60527			Amount of Contribution (\$)	\$14.28			
	Principal occup Programmer	pation / Job title (See Instructions)		Employer (See Instructions Grainger	s)		

MONET	TARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
The Instru	ection Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 52/52 Rpt: 57/179
2 FILER NAME Texas Dem	ecratic Party		3 Filer ID (Ethics Commission Filers) 00015831
4 Date 06/29/2024	 5 Full name of contributor out-of-state PAC (ID#:_Zatyko, Steven 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00
	Coppell, TX 75019		
8 Principal occi It Consultar		9 Employer (See Instructions Self-Employed	s)
Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_Zwiener, Erin Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,500.00
Principal occi	Driftwood, TX 78619 upation / Job title (See Instructions)	Employer (See Instructions	
Author	apation / 300 title (See Instructions)	Self-Employed	9)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 58/179 3 Filer ID (Ethics Commission Filers) FILER NAME **Texas Democratic Party** 00015831 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/05/2024 Meed, Alex \$1,028.00 | Consulting 7 Contributor address; City; State; Zip Code Austin, TX 78703 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Not Employed Not Employed 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 04/08/2024 Schmidt, Eric \$1,800.00 Food, Lodging, Supplies Contributor address; City; State; Zip Code Palo Alto, CA 94301 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to	complet	te this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 1/115 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		•
03/04/2024	3145 PHMB LP		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$5,348.37	812 San Antonio, Ste 105		
Expenditure from corporate funds	Austin, TX 78701		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	[Check if travel outside of Texas. Complete Schedule T.
		l l	Check if Austin, TX, officeholder living expense Rent
			None
9 Complete ONLY if direct	Candidate/Officeholder name Office s	l sought	Office held
expenditure to benefit C/O			5555d
Date	Payee name		
02/29/2024	3145 PHMB LP		
Amount (\$)	Payee address; City; State; Zip	Code	
\$5,348.37	812 San Antonio, Ste 105	Coue	
ψ3,340.37	oiz San Antonio, Ste 103		
Expenditure from corporate funds	Austin, TX 78701		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	[Check if travel outside of Texas. Complete Schedule T.
		l l	Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
expenditure to benefit C/O	Н	· ·	
Date	Payee name		
03/20/2024	3145 PHMB LP		
Amount (\$)	Payee address; City; State; Zip	Code	
\$5,348.37	812 San Antonio, Ste 105	2000	
,5,5 .5.61			
Expenditure from corporate funds	Austin, TX 78701		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	[Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct	Candidate/Officeholder name Office s	sought	Office held
expenditure to benefit C/O		Jugiit	Onice near

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/26/2024	3145 PHMB LP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,348.37	812 San Antonio, Ste 105
- "	
Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Rent
	T.C.II.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
5 .	
Date	Payee name
02/27/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$34.08	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Garnishment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$216.70	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/04/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Evpanditura from	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Garnishment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/07/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$63.59	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Processing Fee
	r ayloli Flocessing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$54.56	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Garnishment
	Sumsiment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	D
Date 03/04/2024	Payee name ADP
Amount (\$)	Payee address; City; State; Zip Code
\$55.85	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EAFEINDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Serv				Vages	s/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not liste	ed above)
		_			uction Guia	e expiairis	now to co	mpie	ete this form.	_			
1	Total pages Schedule F1:	2								3	Filer ID	(Ethics Com	mission Filers)
	Sch: 5/115 Rpt:		Texas Dem	nocratic I	Party						00015831		
4	Date	5	Payee name	;									
	03/04/2024		ADP										
6	Amount (\$)	7	Payee addre	988. C	City;	State	; Zip Co	nde					
٠	\$34.08	ľ	3724 Execu		-	State	, Zip CC	uc					
	φ34.00		3724 EXEC	ulive Cei	itei Diive								
_	T Expenditure from												
Щ	corporate funds		Austin, TX	78731									
8	PURPOSE	(a)	Category (S	See Categori	es listed at the t	top of this sch	nedule)	(b)	Description				
	OF		Fees				,		Check if travel	outsi	de of Texas. Con	plete Schedule T	
	EXPENDITURE								Check if Austin,	, TX,	officeholder living	g expense	
									Payroll Proce	ssi	ng Fee		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder	name	(Office sou	ght			Office h	eld	
		_											
	Date		Payee name)									
	03/20/2024		ADP										
	Amount (\$)		Payee addre	ess; C	City;	State	; Zip Co	de					
	\$61.01		3724 Exect	utive Ce	nter Drive								
	Expenditure from corporate funds		Austin, TX	78731									
	PURPOSE	(a)	Category (S	See Categori	es listed at the t	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Fees									plete Schedule T	
									_		officeholder livin	g expense	
									Payroll Proce	SSI	ng Fee		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	ficeholder	name	(Office sou	ght			Office h	eld	
	Date		Payee name										
	03/20/2024		ADP										
	Amount (\$)	H	Payee addre	266. C	City;	State	; Zip Co	nde					
	\$569.60		3724 Execu			Siaic	, Ζιρ Ο	ue					
	φ509.00		3724 EXEC	ulive Cei	itei Diive								
	Expenditure from corporate funds		Austin, TX	78731									
	PURPOSE	(a	Category (S	See Categorie	es listed at the t	ton of this sch	nedule)	(b)	Description				
	OF	l`	Salaries/W				icuaic)	` ´		outsi	de of Texas. Con	plete Schedule T	
	EXPENDITURE			agee, ee		·			Check if Austin,	, TX,	officeholder living	g expense	
									Garnishment				
	Complete ONLY if direct	Ь,	Candidate/Off	ficeholder	name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/O				*			J					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$34.08	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Processing Fee
	T dyroin rocessing ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/20/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$61.01	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Garnishment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	-
03/20/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip C	rode
\$704.61	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		rayion laxes
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		ugnit Onice neiu
Dete	Г _	
Date	Payee name	
03/20/2024	ADP	
Amount (\$)	Payee address; City; State; Zip C	rode
\$245.15	3724 Executive Center Drive	
Expenditure from		
corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		rayion raxes
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		ugnt Onice held
<u> </u>	T _	
Date	Payee name	
03/20/2024	ADP	
Amount (\$)	Payee address; City; State; Zip C	rode
\$1,719.10	3724 Executive Center Drive	
Expenditure from		
corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		ayron ruxes
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		ugrit Onlice Held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/115 Rpt:	Texas Democratic Party 00015831
	<u> </u>
4 Date	5 Payee name
03/20/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.41	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	
OF OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
03/20/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$275.38	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	
OF OF	'
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/20/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$679.39	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	s)
Sch: 9/115 Rpt:	Texas Democratic Party 00015831	-,
4 Date	5 Payee name	
03/20/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$641.31	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
	Payroll Taxes	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	the state of the s	
	T	
Date	Payee name	
03/20/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	
\$491.57	3724 Executive Center Drive	
— Formanditure from		
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Payroll Taxes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialiture to benefit C/Oi	·	
Date	Payee name	
03/20/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	
\$552.93	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE	l a l	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Salaties/ Wages/Contract Labor	
	Payroll Taxes	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula E4:	
1 Total pages Schedule F1:	
Sch: 10/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$334.17	3724 Executive Center Drive
Ψ554.17	3724 Executive Genter Drive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/26/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Evpanditura from	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Garnishment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/26/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$61.01	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
	,
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Garnishment
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/26/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$5,813.31	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
06/26/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EAPENDITUKE	Check if Austin, TX, officeholder living expense
	Garnishment
_	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/26/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$9,494.75	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Oi	
Date	Payee name
02/29/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$1,495.29	3724 Executive Center Drive
4_,.00.20	0.2.2.2.000
Expenditure from	A
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Tuxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
03/08/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$106.92	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	las
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 13/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/15/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,464.32	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayion raxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
Date	Dougo nama
	Payee name
05/24/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$120.94	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Processing Fee
	rayioli Flocessing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
05/31/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$5,471.68	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioii taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/31/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$14,853.14	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	
Date	Payee name
03/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$114.29	3724 Executive Center Drive
·	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval cutside of Taylor Camplete Schedule T
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
	and the state of t
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y
Date	Payee name
03/28/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$4,338.51	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/15/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,268.32	3724 Executive Center Drive
Expenditure from	Auctin TV 78721
corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$114.29	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/15/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$12,647.19	3724 Executive Center Drive
Ψ12,041.13	6724 Excoditive Genter Brive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVEN DITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations made by Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 16/115 Rpt:	Texas Democratic Party 00015831
•	
4 Date	5 Payee name
04/26/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$117.62	3724 Executive Center Drive
Funanditura from	
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit 6/61	<u>'</u>
Date	Payee name
04/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$4,874.93	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/30/2024	ADP
	Payee address; City; State; Zip Code
Amount (\$) \$12,647.16	3724 Executive Center Drive
\$12,047.10	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	1 dyron
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	U
Forms provided by Tayas E	thics Commission www.athics state ty us Version V/A 1 0 d278aba

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comi Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/10/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$117.62	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(b) December 1
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
	Taylon Freedomy Co
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
05/15/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
` '	3724 Executive Center Drive
\$5,702.97	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
6 .	
Date	Payee name
05/15/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$14,960.19	3724 Executive Center Drive
Expenditure from	Austin, TX 78731
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 18/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/14/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,278.03	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll Taxes
	T dyfoli Tuxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
06/21/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$120.94	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
06/07/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$120.94	3724 Executive Center Drive
Ψ120.94	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Payroll Processing Fee
	Payroll Processing Fee
Complete CNII V if alia	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 19/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/28/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,831.18	3724 Executive Center Drive
Evpanditura from	
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Tuxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Para a same
Date	Payee name
03/04/2024	AT&T
Amount (\$)	Payee address; City; State; Zip Code
\$110.11	PO BOX 5014
Expenditure from	
corporate funds	Carol Stream, IL 60197
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
_/	Check if Austin, TX, officeholder living expense
	Telephone
Commission ONII V if disposi	Condidate/Office helds name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
03/20/2024	AT&T
Amount (\$)	Payee address; City; State; Zip Code
\$110.11	PO BOX 5014
Expenditure from	
corporate funds	Carol Stream, IL 60197
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Telephone
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponential to belief 0/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 20/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	AT&T
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$110.11	PO BOX 5014
— Foreseditors from	
Expenditure from corporate funds	Carol Stream, IL 60197
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Telephone
	i diophichic
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/03/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$9.75	14 Arrow St
Ψ9.73	
Expenditure from	Suite 11
corporate funds	Cambridge, MA 02138
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Crount out a 1 1000000 fing 1 000
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/10/2024	Payee name ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code 14 Arrow St
\$13.34	
Expenditure from	Suite 11
corporate funds	Cambridge, MA 02138
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Greatt Cara i Toccssing i ees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Met
Candidate/Officeholder/Political Committee Legal Services

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to cor	ages/Contract Labor OTHER (enter a category not listed above) nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u>'</u>
03/17/2024	ActBlue Technical Services	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$6.93	14 Arrow St	
Expenditure from	Suite 11	
corporate funds	Cambridge, MA 02138	
8 PURPOSE OF	3 ((b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sout	tht Office held
Data		
Date 06/02/2024	Payee name ActBlue Technical Services	
		No.
Amount (\$) \$11.01	Payee address; City; State; Zip Coo 14 Arrow St	ue
Φ11.01	Suite 11	
Expenditure from corporate funds	Cambridge, MA 02138	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
		3
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
06/09/2024	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$401.33	14 Arrow St	
	Suite 11	
Expenditure from corporate funds	Cambridge, MA 02138	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Processing Fees
		Credit Card Frocessing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/O		,

SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 22/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/16/2024	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$11.54	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Great Gura i rocessing i ees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
02/25/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$32.62	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/31/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$9.99	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Cradit Cord Processing Food
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/24/2024	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.79	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Credit Card Processing Pees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
04/07/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$3.54	14 Arrow St
	Suite 11
Expenditure from	
corporate funds	Cambridge, MA 02138
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/14/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$9.14	14 Arrow St
***	Suite 11
Expenditure from	
corporate funds	Cambridge, MA 02138
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 24/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/21/2024	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.74	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
	Credit Card Processing Pees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/28/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$10.62	14 Arrow St
	Suite 11
Expenditure from	Cambridge, MA 02138
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
05/05/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$6.64	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Conditions (Michael Office holder (Political

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 25/115 Rpt:	Texas Democratic Party 00015831
·	
4 Date	5 Payee name
05/12/2024	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.56	14 Arrow St
	Suite 11
Expenditure from corporate funds	Cambridge, MA 02138
<u> </u>	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel sutside of Taxes, Complete Schedule T
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/19/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$5.12	14 Arrow St
Ψ5.12	
Expenditure from	Suite 11
corporate funds	Cambridge, MA 02138
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	
Date	Payee name
05/26/2024	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$115.45	14 Arrow St
	Suite 11
Expenditure from	Cambridge, MA 02138
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Processing Fees
	Ground Gard 1 100000111g 1 0000
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 26/115 Rpt:	2 FILER NAME Texas Democratic Party 3 Filer ID (Ethics Commission Filers) 00015831
4 Date 06/30/2024	5 Payee name ActBlue Technical Services
6 Amount (\$) \$22.51 Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14 Arrow St Suite 11 Cambridge, MA 02138
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date 06/23/2024	Payee name ActBlue Technical Services
Amount (\$) \$2.10 Expenditure from corporate funds	Payee address; City; State; Zip Code 14 Arrow St Suite 11 Cambridge, MA 02138
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 05/07/2024	Payee name Adobe Systems, Inc.
Amount (\$) \$138.53	Payee address; City; State; Zip Code 345 Park Ave
Expenditure from corporate funds	San Jose, CA 95110
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 27/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/26/2024	Alcala, Monique
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,466.18	809 S. Lamar Blvd. #344
Expenditure from corporate funds	Austin, TX 78704
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$76.32	275 Seventh Ave
4.0.02	
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
05/07/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$86.40	275 Seventh Ave
Ψ00.40	270 000011117 WC
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 28/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$108.96	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Bank Fee
	Banki ee
O Consulate ONE Vitalian et	Our did to 10 ff as had done as many
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$86.40	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
E/11 E/10/1. (Check if Austin, TX, officeholder living expense
	Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to benefit 5/5/	<u> </u>
Date	Payee name
05/24/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$20.00	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 29/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/27/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.00	275 Seventh Ave
— Forestitus from	
Expenditure from corporate funds	New York, NY 10001
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Bank Fee
	Banki ee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
04/26/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$20.00	275 Seventh Ave
— Formanditure from	
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/28/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$20.25	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/OI	•

SCHEDULE F1

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

Fees Office Overhead/Rental Expens
Food/Beverage Expense Polling Expense
Git/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

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

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

Credit Card Payment	The Instruction Guide explains how to c	comple	te this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 30/115 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		'
05/07/2024	Amazon.com		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$21.47	PO Box 80463		
Expenditure from corporate funds	Seattle, WA 98108		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Office Supplies
			Cinic Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held
expenditure to benefit C/O		ougnt	
Date	Davis and		
05/07/2024	Payee name Amazon.com		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$6.79	PO Box 80463		
Expenditure from	CW- WA 00100		
corporate funds	Seattle, WA 98108		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held
expenditure to benefit C/O	Н		
Date	Payee name		
05/07/2024	Amazon.com		
Amount (\$)	Payee address; City; State; Zip C	Code Code	
\$173.89	PO Box 80463	Jouc	
Ψ1.0.03			
Expenditure from corporate funds	Seattle, WA 98108		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(h)	Description
OF	Office Overhead/Rental Expense	(")	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Chief Cvernoda/Nortal Expense		Check if Austin, TX, officeholder living expense
			Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held
expenditure to benefit C/OI	п 		
I			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 31/115 Rpt:	Texas Democratic Party 00015831		
4 Date	5 Payee name		
05/07/2024	Amazon.com		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$6.44	PO Box 80463		
Expenditure from corporate funds	Seattle, WA 98108		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Office Supplies		
	Οπίου σαμβίουσ		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Davies same		
05/07/2024	Payee name		
	Amazon.com		
Amount (\$)	Payee address; City; State; Zip Code		
\$18.00	PO Box 80463		
Expenditure from			
corporate funds	Seattle, WA 98108		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		
	Check if Austin, TX, officeholder living expense Office Supplies		
	Office Supplies		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
D-4-			
Date	Payee name		
05/07/2024	American Coachlines LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$10,990.00	11800 Glass House Lane, Suite 1438		
Expenditure from			
corporate funds	Orlando, FL 32836		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
_/	Check if Austin, TX, officeholder living expense		
	Transportation		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	T. 1 01 11 E1	<u>.</u>	O FILED (Filting Countries of Files)
1	Total pages Schedule F1: Sch: 32/115 Rpt:	Z FILER NAME Texas Democratic Party	3 Filer ID (Ethics Commission Filers) 00015831
4	Date	5 Payee name	
	03/20/2024	Beam Dental Group	
6	Amount (\$) \$265.25	7 Payee address; City; State; Zip Code 226 N 5th St Ste 400	
	Expenditure from corporate funds	Columbus, OH 43215	
8	PURPOSE OF EXPENDITURE	Onice Overnedd/Nerital Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense NCE
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/04/2024	Beam Dental Group	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$544.88	226 N 5th St Ste 400	
	Expenditure from corporate funds	Columbus, OH 43215	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense NCE
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/20/2024	Blue Cross Blue Shield	
	Amount (\$) \$5,330.20	Payee address; City; State; Zip Code PO Box 731428	
	Expenditure from corporate funds	Dallas, TX 75266	
	PURPOSE OF EXPENDITURE	Onice Overneau/Nental Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense NCE
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
For	rms provided by Texas E	nics Commission www.ethics.state.tx.us	Version V4.1.0.d378aba0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 33/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
02/29/2024	Blue Cross Blue Shield
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,733.24	PO Box 731428
Expenditure from corporate funds	Dallas, TX 75266
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Health Insurance
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/26/2024	Blue Cross Blue Shield
Amount (\$)	Payee address; City; State; Zip Code
\$8,603.96	PO Box 731428
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Health Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2024	Blue Cross Blue Shield
Amount (\$)	Payee address; City; State; Zip Code
\$7,482.88	PO Box 731428
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Health Insurance
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Fees Office Overhead/Rents
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Legal Services Salaries/Wages/Contr

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 34/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
02/27/2024	Bowen, Brigitte
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,801.14	406 Denson Drive, Unit A
- "	
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
	Check if Austin, TX, officeholder living expense Payroll
	T dyfoli
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	<u> </u>
Date	Payee name
03/04/2024	Bowen, Brigitte
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.33	406 Denson Drive, Unit A
Expenditure from	
corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission ONII V if dispose	Condidate/Office helds name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Bowen, Brigitte
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.32	406 Denson Drive, Unit A
Expenditure from	
corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
0 1: 0:::::::::::::::::::::::::::::::::	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 35/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Bowen, Brigitte
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,812.33	406 Denson Drive, Unit A
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll
	1 ayron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Dougo nama
	Payee name
04/26/2024	Bowen, Brigitte
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.33	406 Denson Drive, Unit A
Expenditure from	
corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-4-	
Date	Payee name
06/26/2024	Bowen, Brigitte
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.33	406 Denson Drive, Unit A
Expenditure from	
corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense Payroll
	Fayioli
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Folling Expense
Salaries/Wangs/Contract Labor

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 36/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/31/2024	Bowen, Brigitte
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	406 Denson Drive, Unit A
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Stipend
	Supenu
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to serious eye.	·
Date	Payee name
02/27/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$819.53	658 CR 3451
Expenditure from corporate funds	Sulphur Springs, TX 75482
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
E/11 E1191. C.1.	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	<u>'</u>
Date	Payee name
03/04/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$823.53	658 CR 3451
·	
Expenditure from corporate funds	Sulphur Springs, TX 75482
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 37/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Brannon, William E
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$823.55	658 CR 3451
·	
Expenditure from corporate funds	Sulphur Springs, TX 75482
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
03/20/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$823.53	658 CR 3451
Ψ020.33	000 CIV 3431
Expenditure from	
corporate funds	Sulphur Springs, TX 75482
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	•
Date	Payee name
05/07/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$823.53	658 CR 3451
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from	Sulphur Springs, TV 75402
corporate funds	Sulphur Springs, TX 75482
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	T dyfoli
Complete ONLY if allow	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 38/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Canva Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.31	2 Lacey St
Expenditure from corporate funds	Sydney Australia, AP 00000
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣
 Date	Payee name
03/04/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,436.97	20319 Continental Drive
Ψ1,400.57	20010 CONTINCTION DIVE
Expenditure from corporate funds	Lago Vista, TX 78645
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	T dyfoli
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Dete	
Date	Payee name
03/20/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,436.98	20319 Continental Drive
Expenditure from	
corporate funds	Lago Vista, TX 78645
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	T dyron
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 39/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/26/2024	Carpenter, Karen B.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,436.97	20319 Continental Drive
Expenditure from corporate funds	Lago Vista, TX 78645
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	1 dyfoli
O Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,436.97	20319 Continental Drive
Expenditure from corporate funds	Lago Vista, TX 78645
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	rayion
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
05/31/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	20319 Continental Drive
Expenditure from corporate funds	Lago Vista, TX 78645
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 40/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/14/2024	Cham, Ashley J
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,391.83	5 Haab Avenue
Expenditure from corporate funds	Brooklyn, NY 11704
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
	1 dyron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/28/2024	Cham, Ashley J
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	5 Haab Avenue
— Formanditure from	
Expenditure from corporate funds	Brooklyn, NY 11704
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
05/07/2024	ChatGPT
Amount (\$)	Payee address; City; State; Zip Code
\$13.62	1455 3rd St.
— Forestitus from	
Expenditure from corporate funds	San Francisco, CA 94158
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiente to benefit 6/01	<u>'</u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 41/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Chatfuel
6 Amount (\$) \$12.80	7 Payee address; City; State; Zip Code 555 De Haro St
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/23/2024	Citrus Grill
Amount (\$)	Payee address; City; State; Zip Code
\$32.34	7315 W Warm Springs Rd
Expenditure from corporate funds	Las Vegas, NV 89113
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2024	Cloudflare
Amount (\$)	Payee address; City; State; Zip Code
\$10.23	101 Townsend
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 42/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/31/2024	Contreras, Joanna
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	1200 Elm Street #108
\$200.00	1200 2.1111 04.000 7/100
Expenditure from	
corporate funds	Austin, TX 78703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Stipend
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	n
Date	Payee name
06/26/2024	Corbitt, Drew
Amount (\$)	
\$965.01	2410 Elkhorn Ranch Road
Expenditure from	
corporate funds	Leander, TX 78641
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
05/31/2024	Corbitt, Drew
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2410 Elkhorn Ranch Road
Expenditure from	
corporate funds	Leander, TX 78641
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 43/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/30/2024	Costco
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$794.87	10401 Research Blvd
— Foresedit ve from	
Expenditure from corporate funds	Austin, TX 78759
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Food
	1 000
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Para a same
Date	Payee name
02/27/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$89.27	2015 Cedar Bend Drive, Apt 1410
Expenditure from	
corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$89.27	2015 Cedar Bend Drive, Apt 1410
Expenditure from	
corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission Chill V II alling	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 44/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Cruz, Brenda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$89.27	2015 Cedar Bend Drive, Apt 1410
Expenditure from corporate funds	Austin, TX 78758
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•
Date	Payee name
03/20/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$89.27	2015 Cedar Bend Drive, Apt 1410
Expenditure from corporate funds	Austin, TX 78758
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
	i ayıcı
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	, v
Date	Payee name
04/26/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$89.27	2015 Cedar Bend Drive, Apt 1410
Ψ03.21	2010 300α Βοίτα Βίτνο, ημε 1710
Expenditure from corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission ONUVIVIII	Condidate (Office holder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Forms provided by Tayas F	thics Commission www.athics state ty us Version V// 1 0 d278aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 45/115 Rpt:	Texas Democratic Party 00015831
-	
4 Date	5 Payee name
06/26/2024	Cruz, Brenda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,716.33	2015 Cedar Bend Drive, Apt 1410
Expenditure from	Auctin TV 70750
corporate funds	Austin, TX 78758
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/31/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2015 Cedar Bend Drive, Apt 1410
Expenditure from	
corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
03/20/2024	DEMpower Labs LLC
Amount (\$)	Payee address; City; State; Zip Code
\$2,560.00	320 Easton Road
Expenditure from corporate funds	Dallas, TX 75218
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Voter Protection Consulting
Complete ONLY if dive -	Candidate/Officeholder name Office acusht
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 46/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	DEMpower Labs LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,560.00	320 Easton Road
Expenditure from corporate funds	Dallas, TX 75218
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if Austin, TX, officeholder living expense
	Voter Protection Consulting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2024	DEMpower Labs LLC
Amount (\$)	Payee address; City; State; Zip Code
\$2,560.00	320 Easton Road
Expenditure from corporate funds	Dallas, TX 75218
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Voter Protection Consulting
Complete ONLY if direct	Condidate/Office helder name Office accords
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2024	Ding, Lucy
Amount (\$)	Payee address; City; State; Zip Code
\$53.20	7805 South Rice Avenue
Expenditure from corporate funds	Bellaire, TX 77401
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiolitile to belieff C/OI	

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.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 47/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
03/04/2024	Ding, Lucy	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$177.31	7805 South Rice Avenue	
,		
Expenditure from corporate funds	Bellaire, TX 77401	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/O		
Date	Payee name	
03/04/2024	Ding, Lucy	
Amount (\$)	Payee address; City; State; Zip	Code
\$354.62	7805 South Rice Avenue	Coue
Ψ334.02	7003 South Nice Avenue	
Expenditure from corporate funds	Bellaire, TX 77401	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
		,
Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/O		
Date	Payee name	
03/20/2024	Ding, Lucy	
		Cada
Amount (\$) \$159.58	Payee address; City; State; Zip 7805 South Rice Avenue	Coue
Ψ1.39.30	1000 South Nice Avenue	
Expenditure from corporate funds	Bellaire, TX 77401	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		. agron
Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/O		oug Office floid
Farmer manifely (1)		V - V - V - V - V - V - V - V - V - V -

SCHEDULE F1

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

Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F Legal Services S

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

Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 48/115 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
04/26/2024	Ding, Lucy	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$106.39	7805 South Rice Avenue	
Expenditure from		
corporate funds	Bellaire, TX 77401	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Payroll	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Payee name	=
02/29/2024	Doody, Dylan	
	21.2	_
Amount (\$)	Payee address; City; State; Zip Code	
\$3,079.84	2200 S Pleasant Valley Rd #129	
Expenditure from		
corporate funds	Austin, TX 78741	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Averte TV officeholder being average.	
	Check if Austin, TX, officeholder living expense Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Davies warms	_
03/15/2024	Payee name Doody, Dylan	
	Doody, Dylan	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,079.83	2200 S Pleasant Valley Rd #129	
Expenditure from		
corporate funds	Austin, TX 78741	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Payroll	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	o	
		_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 49/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/17/2024	Doody, Dylan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$409.00	2200 S Pleasant Valley Rd #129
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78741
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Mileage
	ivilicage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	David and the second se
Date	Payee name
03/28/2024	Doody, Dylan
Amount (\$)	Payee address; City; State; Zip Code
\$3,079.84	2200 S Pleasant Valley Rd #129
Expenditure from	
corporate funds	Austin, TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/23/2024	Doody, Dylan
Amount (\$)	Payee address; City; State; Zip Code
\$667.50	2200 S Pleasant Valley Rd #129
Expenditure from corporate funds	Austin, TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Mileage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponential to belief 0/01	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 50/115 Rpt:	Texas Democratic Party 00015831
-	
4 Date	5 Payee name
06/14/2024	Doody, Dylan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,079.83	2200 S Pleasant Valley Rd #129
Expenditure from corporate funds	Austin, TX 78741
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
06/28/2024	Doody, Dylan
Amount (\$)	Payee address; City; State; Zip Code
\$3,079.84	2200 S Pleasant Valley Rd #129
·	
Expenditure from corporate funds	Austin, TX 78741
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/07/2024	Drivestrike
Amount (\$)	Payee address; City; State; Zip Code
\$3.46	333 S 520W, Suite 180
Expenditure from	
corporate funds	Lincoln, NE 84042
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Software
Complete Chill V if all a	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - I Coı	mmittee Le	t/Awards/Memorials gal Services ne Instruction Gu			Vages	s/Contract Labor		Travel Out of D OTHER (enter a	istrict a category not listed a	above)
1	Total pages Schedule F1:	2	FII FR NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 51/115 Rpt:	_	Texas Democ	ratic Party						00015831	(=====	
4	Date	5	Payee name						•			
	06/17/2024		Dunkin Donut	S								
6	Amount (\$)	7	Payee address;	City;	State:	; Zip Co	de					
	\$80.39		7000 West Mi	litary Pkwy								
Ш	Expenditure from corporate funds		San Antonio,	TX 78227								
8	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Event Expens	e				=			nplete Schedule T.	
	ZAL ZINGING							Check if Austin	ı, TX,	, officeholder livin	g expense	
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Office	holder name	(Office sou	ght			Office h	eld	
F	Date		Payee name									
	03/08/2024		El Paso Conv	ention and Pe	rforming A	rts Cente	er					
	Amount (\$)		Payee address;	City;	State:	; Zip Co	de					
	\$23,927.13		One Civic Cer	nter Plaza								
L	☐ Expenditure from											
L	corporate funds		El Paso, TX 7	9901								
	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Event Expens	e				=			nplete Schedule T.	
	_/							ш		, officeholder livin	g expense	
								Facility Renta	aı			
_	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	holder name	C	Office sou	ght			Office h	eld	
	experience to benefit 6/6/											
	Date		Payee name									
	06/11/2024		El Paso Conv	ention and Pe	rforming Ar	rts Cente	er					
	Amount (\$)		Payee address;	City;	State:	; Zip Co	de					
	\$16,524.30		One Civic Cer	nter Plaza								
	Expenditure from corporate funds		El Paso, TX 7	9901								
	PURPOSE	(2)					(h)	Description				
	OF	(a)	Category (See		ne top of this sch	iedule)	(D)	Description Check if travel	outsi	ide of Texas, Cor	nplete Schedule T.	
	EXPENDITURE		Event Expens	е				<u></u>		, officeholder livin		
								Event Space				
Н	Complete ONLY if direct	(Candidate/Office	holder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/O						J					

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete the	nis form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 52/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
05/20/2024	El Paso Convention and Performing Arts Center	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10,000.00	One Civic Center Plaza	
Expenditure from corporate funds	El Paso, TX 79901	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	I — I —	Check if Austin, TX, officeholder living expense
	Fac	cility Rental
O Commisto ONII V if direct	Condidate/Officeholder page	Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
05/07/2024	Envato	
Amount (\$)	Payee address; City; State; Zip Code	
\$22.86	121 King St	
Expenditure from		
corporate funds	Melbourne, AE 00000	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	·
OF EXPENDITURE	Office Overficad/Nertial Experise	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	I — I —	oscription
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		
Date	Payee name	
05/07/2024	EveryAction Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,014.46	655 15th St NW, Suite 650	
,,,,,		
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE		porinting
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
	Soft	ftware
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
experiulture to beliefft C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 53/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Feistauer, Isabella
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$279.26	3001 Cedar Street, 211
Expenditure from	Auctin TV 79705
corporate funds	Austin, TX 78705
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/20/2024	Feistauer, Isabella
	·
Amount (\$)	Payee address; City; State; Zip Code
\$279.27	3001 Cedar Street, 211
Expenditure from corporate funds	Austin, TX 78705
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
	T dyfoli
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	'
Date	Payee name
04/26/2024	Feistauer, Isabella
Amount (\$)	Payee address; City; State; Zip Code
\$279.26	3001 Cedar Street, 211
Φ219.20	3001 Cedal Stieet, 211
Expenditure from	
corporate funds	Austin, TX 78705
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 54/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/26/2024	Feistauer, Isabella
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$243.81	3001 Cedar Street, 211
ΨΣ-10.01	oool oodal olloot, 211
Expenditure from corporate funds	Austin, TX 78705
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
	, in the second of the second
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/31/2024	First National Bank of Omaha
Amount (\$)	Payee address; City; State; Zip Code
\$2,222.30	14010 FNB Pkwy
Ψ2,222.00	TIOLOT NOT KMy
Expenditure from corporate funds	Omaha, NE 68154
PURPOSE	·
OF OF	- (constrained and the constrained and the con
EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Credit Card Payment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davies name
05/07/2024	Payee name Freehworks
05/07/2024	Freshworks
Amount (\$)	Payee address; City; State; Zip Code
\$39.51	2950 S Delaware, Suite 201
Formation of the	
Expenditure from corporate funds	San Mateo, CA 94403
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 55/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Freshworks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$54.25	2950 S Delaware, Suite 201
Expenditure from corporate funds	San Mateo, CA 94403
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Subscription
	Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
05/07/2024	Freshworks
Amount (\$)	Payee address; City; State; Zip Code
\$32.07	2950 S Delaware, Suite 201
Expenditure from corporate funds	San Mateo, CA 94403
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	•
Date	Payee name
02/27/2024	Garcia, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$1,826.36	5629 N Lamar Blvd, Apt 414
. ,	
Expenditure from	Austin, TX 78751
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Texas Democratic Party 00015831
5 Payee name
Garcia, Ryan
7 Payee address; City; State; Zip Code
5629 N Lamar Blvd, Apt 414
Austin, TX 78751
(a) Category (See Categories listed at the top of this schedule) (b) Description
Salaries/Wages/Contract Labor
Check if Austin, TX, officeholder living expense Payroll
T dyfoli
Candidate/Officeholder name Office sought Office held
Candidate/Onicenoider name Onice sought Onice neid
Payee name
Garcia, Ryan
Payee address; City; State; Zip Code
5629 N Lamar Blvd, Apt 414
Austin, TX 78751
(a) Category (See Categories listed at the top of this schedule) (b) Description
Salaries/Wages/Contract Labor
Check if Austin, TX, officeholder living expense
Payroll
Candidate/Officeholder name Office sought Office held
Payee name
Garcia, Ryan
Payee address; City; State; Zip Code
5629 N Lamar Blvd, Apt 414
Austin, TX 78751
(a) Category (See Categories listed at the top of this schedule) (b) Description
Salaries/Wages/Contract Labor
Check if Austin, TX, officeholder living expense
Check if Austin, TX, officeholder living expense Payroll
Candidate/Officeholder name Check if Austin, TX, officeholder living expense
Check if Austin, TX, officeholder living expense Payroll
Candidate/Officeholder name Check if Austin, TX, officeholder living expense

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 57/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	- I
04/26/2024	Garcia, Ryan	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$1,837.55	5629 N Lamar Blvd, Apt 414	
Expenditure from corporate funds	Austin, TX 78751	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
'		
Date	Payee name	
03/06/2024	Garcia, Ryan	
Amount (\$)	Payee address; City; State; Zip Co	de
\$179.00	5629 N Lamar Blvd, Apt 414	
Expenditure from		
corporate funds	Austin, TX 78751	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage
		·····cage
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	Н	•
Date	Payee name	
05/31/2024	Garcia, Ryan	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$250.00	5629 N Lamar Blvd, Apt 414	
Ψ=00.00	5020 11 2aman 210a, 7 pt 12 1	
Expenditure from corporate funds	Austin, TX 78751	
PURPOSE		(h) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Stipend
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held
experiulture to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 58/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	GoDaddy.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$28.38	14455 N Hayden Rd, Ste 219
Expenditure from corporate funds	Scottsdale, AZ 85260
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Domain Names
	Domain Names
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
05/07/2024	GoDaddy.com
Amount (\$)	Payee address; City; State; Zip Code
\$16.29	14455 N Hayden Rd, Ste 219
Expenditure from	
corporate funds	Scottsdale, AZ 85260
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Domain Names
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2024	Google.com
Amount (\$)	Payee address; City; State; Zip Code
\$1.36	1600 Amphitheatre Parkway
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Online Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•

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

Credit Card Layment	The Instruction Guide explains how to compl	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 59/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
05/07/2024	Google.com	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$50.57	1600 Amphitheatre Parkway	
Evponditure from		
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE	c y (coo caregorica actual top or and constant)) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Storage
		Chilling Clorage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		333
Date	Payee name	
03/14/2024	Payee name Gostomski, Samuel	
Amount (\$)	, ,,	
\$103.00	110 Jacob Fontaine Ln, Apt #168	
Expenditure from	A 21 TV 707F0	
corporate funds	Austin, TX 78752	
PURPOSE OF	c , (cor emigene more at the crime constant)	Description Check if travel outside of Taylor Complete School In T
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	1	
Date	Payee name	
05/31/2024	Gostomski, Samuel	
Amount (\$)	Payee address; City; State; Zip Code	
\$250.00	110 Jacob Fontaine Ln, Apt #168	
+=	TTO GOOD I OHEANS EN, 195 // 255	
Expenditure from corporate funds	Austin, TX 78752	
PURPOSE) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

xpense Travel in Distri Expense Travel Out of E Wages/Contract Labor OTHER (enter

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 60/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Great America Financial Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$450.37	PO Box 660831
Expenditure from corporate funds	Dallas, TX 75266
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Conjury
	Copier
O Commission ONII V if diment	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	the state of the s
Date	Payee name
03/20/2024	Great America Financial Services
Amount (\$)	Payee address; City; State; Zip Code
\$450.37	PO Box 660831
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Copier
	Sop.io.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/20/2024	Great America Financial Services
Amount (\$)	Payee address; City; State; Zip Code
\$125.80	PO Box 660831
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Property Tax
	Troporty Tax
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 61/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/26/2024	Great America Financial Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$450.37	PO Box 660831
Expenditure from corporate funds	Dallas, TX 75266
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Conjor
	Copier
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
05/07/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$114.50	P.O. Box 839999
Expenditure from corporate funds	San Antonio, TX 78283
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ere	
Date	Payee name
05/07/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$101.31	P.O. Box 839999
Expenditure from corporate funds	San Antonio, TX 78283
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	7 - Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	
Sch: 62/115 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
05/07/2024	Hilton - Corporate	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$368.92	7930 Jones Branch Dr	
+555.52		
Expenditure from	Mal 2017 VA 20100	
corporate funds	McLean, VA 22102	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Lodging	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
05/07/2024	Hilton - Corporate	
Amount (\$)	Payee address; City; State; Zip Code	
\$126.70	7930 Jones Branch Dr	
- Formanditure Cons		
Expenditure from corporate funds	McLean, VA 22102	
PURPOSE		
OF		
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Lodging	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
04/23/2024	Hilton - Corporate	
Amount (\$)	Payee address; City; State; Zip Code	
\$100.25	7930 Jones Branch Dr	
+233120		
Expenditure from	M. L	
corporate funds	McLean, VA 22102	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
LAI LINDITORE	Check if Austin, TX, officeholder living expense	
	Lodging	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to comp	elete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 63/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
04/23/2024	Hilton - Corporate	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$233.97	7930 Jones Branch Dr	
Expenditure from corporate funds	McLean, VA 22102	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging
		Louging
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O		Conice neid
<u> </u>		
Date	Payee name	
05/31/2024	Holloway, Kiara	
Amount (\$)	Payee address; City; State; Zip Code	
\$250.00	5705 Diehl Trail, APT 330	
Expenditure from		
corporate funds	Austin, TX 78727	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	•	t Office field
Date	Payee name	
06/04/2024	Hotel Paso Del Norte	
Amount (\$)	Payee address; City; State; Zip Code	
\$36,265.20	10 Henry Trost Court	
Expenditure from		
corporate funds	El Paso, TX 79901	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Facility Rental
Operation Children	Overdidate/Office halds are seen as 2000	06
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
, ,		
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 64/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Houston Chronicle
6 Amount (\$) \$19.19	7 Payee address; City; State; Zip Code P.O. Box 4560
Expenditure from corporate funds	Houston, TX 77210
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Subscription
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$100.48	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$21.05	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 65/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
05/07/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$58.90	2700 Coast Ave	
Expenditure from		
corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	н	-
Date	Payee name	
05/07/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Co	de
\$49.62	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sour	ght Office held
expenditure to benefit C/O	H	
Date	Payee name	
05/07/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Co	de
\$20.58	2700 Coast Ave	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O		-

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 66/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
05/07/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$13.76	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) =	(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	rees	Check if Austin, TX, officeholder living expense
		Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	1	
Date	Payee name	
05/07/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Co	de
\$9.86	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(2) 2	(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 000	Check if Austin, TX, officeholder living expense
		Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialture to benefit C/O	1	
Date	Payee name	
03/20/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Co	de
\$3.83	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
SAPORGICATO TO DOTTORE O/OI	•	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 67/115 Rpt:	Texas Democratic Party	00015831		
4 Date	5 Payee name	<u> </u>		
03/20/2024	Intuit			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$24.88	2700 Coast Ave			
Expenditure from corporate funds	Mountain View, CA 94043			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Processing Fee		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	I ught Office held		
expenditure to benefit C/O				
Date	Payee name			
03/20/2024	Intuit			
Amount (\$)		ada		
\$100.01	Payee address; City; State; Zip C 2700 Coast Ave	oue		
\$100.01	2700 Coast Ave			
Expenditure from	Manustain Vienn CA 04040			
corporate funds	Mountain View, CA 94043			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Processing Fee		
Complete ONLY if direct	Candidate/Officeholder name Office so	ıght Office held		
expenditure to benefit C/O	Н			
Date	Payee name			
03/20/2024	Intuit			
Amount (\$)	Payee address; City; State; Zip C	nde		
\$34.48	2700 Coast Ave			
496	2.00 00000			
Expenditure from corporate funds	Mountain View, CA 94043			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Processing Fee		
Complete ONLY if direct	Candidate/Officeholder name Office so	lught Office held		
expenditure to benefit C/O		Onice neid		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethio	cs Commission Filers)
Sch: 68/115 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name			
03/20/2024	Intuit			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$34.12	2700 Coast Ave			
Expenditure from corporate funds	Mountain View, CA 94043			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees		vel outside of Texas. Complete Sc	hedule T.
EXPENDITURE			stin, TX, officeholder living expens	se
		Processing	j ⊢ee	
		1.	000	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soul	ght	Office held	
·				
Date	Payee name			
03/20/2024	Intuit			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$65.96	2700 Coast Ave			
Expenditure from				
corporate funds	Mountain View, CA 94043			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	ш	vel outside of Texas. Complete So	
		Processing	stin, TX, officeholder living expens	se
		1 1000001119	, , , , ,	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/OI		5		
Date	Payee name			
03/04/2024	Intuit			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$7.27	2700 Coast Ave	ue		
Ψ1.21	2700 00051740			
Expenditure from	Mountain View CA 04042			
corporate funds	Mountain View, CA 94043			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	vel outside of Texas. Complete So	hadula T
EXPENDITURE	Fees		stin, TX, officeholder living expens	
		Processing	j Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/OI	4			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services The Instruction Guide explains h		ages	es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	EILER NAME		_	3 Filer ID (Ethics Commission Filers)
•						
	Sch: 69/115 Rpt:		Texas Democratic Party			00015831
4	Date	5	Payee name			
	03/04/2024		Intuit			
6	Amount (\$)	7	Payee address; City; State;	Zip Cod	de	
	\$2.59		2700 Coast Ave			
	Ψ2.00		2700 000317100			
_	T Expenditure from					
┞	corporate funds		Mountain View, CA 94043			
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)) Description
	OF		Fees	,		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin, TX, officeholder living expense
						Processing Fee
9	Complete ONLY if direct	. (Candidate/Officeholder name O	Office soug	ght	t Office held
	expenditure to benefit C/OI	Н				
-	Date	Г	Daylog nama			
			Payee name			
	03/20/2024		Intuit			
	Amount (\$)		Payee address; City; State;	Zip Cod	de	
	\$5.55		2700 Coast Ave			
	Expenditure from corporate funds		Mountain View, CA 94043			
_	PURPOSE	(2)		1.	(h)) Description
	OF	رم) 	Category (See Categories listed at the top of this sche	edule)	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Fees			Check if Austin, TX, officeholder living expense
						Processing Fee
						3
_	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name O	Office soug	ıht	t Office held
	expenditure to benefit C/OI		Sandidate/Officeriolder flame	Jilice Souç	JIIL	t Office field
	<u>'</u>					
	Date		Payee name			
	03/20/2024		Intuit			
	Amount (\$)		Payee address; City; State;	Zip Cod	de	
	\$8.13		2700 Coast Ave			
	Ψ0.10		2.00 00000,00			
┢	Expenditure from					
Ш	corporate funds		Mountain View, CA 94043	_		
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description
	OF EXPENDITURE		Fees			Check if travel outside of Texas. Complete Schedule T.
	TVI FIADITORE					Check if Austin, TX, officeholder living expense
						Processing Fee
		L				
	Complete ONLY if direct		Candidate/Officeholder name O	Office soug	ght	t Office held
	expenditure to benefit C/OI	Н				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 70/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$24.88	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$18.85	2700 Coast Ave
410.00	2100 0000710
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$1.86	2700 Coast Ave
Ψ1.00	2100 00001100
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EAFEINDITURE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 71/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$13.43	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$22.29	2700 Coast Ave
Φ22.29	2700 Codst Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$14.30	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 72/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$49.75	2700 Coast Ave
Evpanditure from	
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Processing Fee
	Frocessing ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
5.	
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$71.34	2700 Coast Ave
— Forestitus from	
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$24.88	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Operated Objects "	Our didn't 10ff a balden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Event Expert
Accounting/Banking Fees
Consulting Expense Food/Bever
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Servi

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 73/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.83	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Processing Fee
	1 Toccssing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$14.60	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date 03/20/2024	Payee name
	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$16.27	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 74/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$35.12	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Processing Fee
	1 Toccssing Fee
O Complete ONLY if alive	Condidate/Officeholder name Office cought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
·	
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$45.93	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Processing Fee
2 1 2 2 2 2 2 2 2	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$10.71	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/0	••

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 75/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
03/20/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$7.27	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experientare to benefit 6/61	<u>'</u>	
Date	Payee name	
03/20/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Co	de
\$68.62	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing Fee
		1 1000331119 1 00
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/O		200 1.0.0
Date	Payao nama	
04/26/2024	Payee name Intuit	
		do
Amount (\$) \$27.85	Payee address; City; State; Zip Co 2700 Coast Ave	ue
ΨΔ1.05	2100 Cuast Ave	
Expenditure from	Mauritain View CA 04040	
corporate funds	Mountain View, CA 94043	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	1	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Gift/Awards/Memorials Exper Legal Services The Instruction Guide e	Salaries/V	Nages/Contract L		Travel Out of Dis OTHER (enter a	strict category not listed above)
1 Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
Sch: 76/115 Rpt:	Texas Demo					00015831	
4 Date	5 Payee name						
04/26/2024	Intuit						
6 Amount (\$) \$29.18	7 Payee addres 2700 Coast		State; Zip Co	ode			
Expenditure from corporate funds	Mountain Vi	ew, CA 94043					
8 PURPOSE	(a) Category (Se	e Categories listed at the top	of this schedule)	(b) Descrip	ntion		
OF EXPENDITURE	Fees	·	•	. =		side of Texas. Com	
LAI LIIDITOILE				. –		, officeholder living	gexpense
				Proces	ssing Fee		
O Complete Children	Complete to the second	obolder		laht.			vid.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	cenoider name	Office sou	ugnt 		Office he	eiu
Date	Payee name						
04/26/2024	Intuit						
Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode			
\$53.20	2700 Coast	Ave					
Farmania or C							
Expenditure from corporate funds	Mountain Vi	ew, CA 94043					
PURPOSE OF	(a) Category (Se	e Categories listed at the top	of this schedule)	(b) Descrip		_ _	
EXPENDITURE	Fees					side of Texas. Com , officeholder living	
					sk if Austin, TX SSING Fee		, expende
				1 10063	y 1 CC		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	 Candidate/Offic H	ceholder name	Office sou	<u>I</u> ıght		Office he	eld
Date	Payee name						
04/26/2024	Intuit						
Amount (\$)	Payee addres	ss; City;	State; Zip Co	nde			
\$18.41	2700 Coast	-					
Expenditure from corporate funds		ew, CA 94043					
PURPOSE		e Categories listed at the top	of this schedule)	(b) Descrip	tion		
OF	Fees	goco nateu at tile top	sorieuulej	ı <u> </u>		side of Texas. Com	plete Schedule T.
EXPENDITURE						, officeholder living	expense
				Proces	ssing Fee		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic H	ceholder name	Office sou	ıght		Office he	eld
Course succession to the Total Course	thing C	-					V'

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1. Total pages Cabadula E1.	
1 Total pages Schedule F1:	
Sch: 77/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/26/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$26.12	2700 Coast Ave
Ψ20.12	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Dete	
Date	Payee name
04/26/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$30.92	2700 Coast Ave
Expenditure from	Mountain View, CA 04042
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/07/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$3.83	2700 Coast Ave
Evnanditura fra	
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 78/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
05/07/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip Code)
\$21.05	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
-		Check if Austin, TX, officeholder living expense Processing Fee
		Flocessing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O		Cinice netu
Data		
Date	Payee name	
04/26/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Code	
\$30.92	2700 Coast Ave	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing Fee
		1 Toccssing 1 cc
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	9	. Since held
Date	Davisa nama	
04/26/2024	Payee name Intuit	
Amount (\$)	Payee address; City; State; Zip Code	,
\$23.16	2700 Coast Ave	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing Fee
		1 Toocssing 1 cc
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O	9	omoc nou

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 79/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.83	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Processing Fee
	1 Toccssing Tee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payeo namo
05/07/2024	Payee name
	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$90.20	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
<u> </u>	
Date	Payee name
05/07/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$17.99	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 80/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$71.96	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Processing Fee
	Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$10.71	2700 Coast Ave
,	
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to beliefit 6/01	'
Date	Payee name
03/04/2024	Kelo, Angela
Amount (\$)	Payee address; City; State; Zip Code
\$695.71	2316 38th Street #2
Ψ000.71	
Expenditure from corporate funds	Galveston, TX 77550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAI LINDITOILE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 81/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Kelo, Angela
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,338.51	2316 38th Street #2
Expenditure from corporate funds	Galveston, TX 77550
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorities to benefit C/Oi	7
Date	Payee name
03/20/2024	Kelo, Angela
Amount (\$)	Payee address; City; State; Zip Code
\$1,338.51	2316 38th Street #2
Expenditure from corporate funds	Galveston, TX 77550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission ONLY if dispose	Condidate/Office helder no rec
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
04/26/2024	Kelo, Angela
Amount (\$)	Payee address; City; State; Zip Code
\$1,338.51	2316 38th Street #2
Expenditure from	
corporate funds	Galveston, TX 77550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll
	T dyron
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 82/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
06/17/2024	Kelo, Angela	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$40.00	2316 38th Street #2	
- Evpanditura from		
Expenditure from corporate funds	Galveston, TX 77550	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Mileage
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI		Cinico Hold
Date	Payee name	
05/20/2024	Kelo, Angela	
	-	
Amount (\$) \$66.85	Payee address; City; State; Zip Code 2316 38th Street #2	•
Φ00.05	2310 3011 311661 #2	
Expenditure from corporate funds	Galveston, TX 77550	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage
		Willeage
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI		
Date	Payee name	
05/31/2024	Kelo, Angela	
Amount (\$)	Payee address; City; State; Zip Code	
\$250.00	2316 38th Street #2	
72000	2020 0001 00001112	
Expenditure from corporate funds	Galveston, TX 77550	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
LXI LINDITORE		Check if Austin, TX, officeholder living expense
		Stipend
Commission ONII V if dispose	Condidate/Officeholder some	t Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office field
•		

SCHEDULE F1

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

Fees Office C
Food/Beverage Expense Polling I
Gift/Awards/Memorials Expense Printing
Legal Services Salaries

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 83/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
02/27/2024	Kumar, Brajesh
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$292.56	28242 Chalet Park Drive
Expenditure from	Koby TV 77404
corporate funds	Katy, TX 77494
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/04/2024	Kumar, Brajesh
Amount (\$)	Payee address; City; State; Zip Code
\$177.31	28242 Chalet Park Drive
Expenditure from corporate funds	Katy, TX 77494
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/04/2024	Kumar, Brajesh
Amount (\$)	Payee address; City; State; Zip Code
\$886.56	28242 Chalet Park Drive
Expenditure from	
corporate funds	Katy, TX 77494
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 84/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/20/2024	Kumar, Brajesh
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$709.25	28242 Chalet Park Drive
— Forestelliture from	
Expenditure from corporate funds	Katy, TX 77494
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	T ayroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/26/2024	Kumar, Brajesh
Amount (\$)	Payee address; City; State; Zip Code
\$620.59	28242 Chalet Park Drive
Expenditure from corporate funds	Katy, TX 77494
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
05/31/2024	Larson, Travis
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	204 Timber Ridge Circle
Expenditure from	
corporate funds	Burleson, TX 76028
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Stipend
	Superiu
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 85/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Later.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.94	353 Water Street #500
Expenditure from corporate funds	Vancouver B, AE 00000
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Subscription
	Subscription
• • · · · · · · · · · · · · · · · · · ·	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/31/2024	Lipka, Ethan
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	801 Sugaree Avenue, 2327
Expenditure from corporate funds	Austin, TX 78757
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Stipend
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/17/2024	Lone Star Awards
Amount (\$)	Payee address; City; State; Zip Code
\$93.15	6400 N. Lamar Blvd
Expenditure from corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Event Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Oi	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	ll Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 86/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/04/2024	Luckey, Desiree
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$714.08	233 Howard Street, Apt 216
Expenditure from corporate funds	San Antonio, TX 78212
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/04/2024	Luckey, Desiree
Amount (\$)	Payee address; City; State; Zip Code
\$1,568.29	233 Howard Street, Apt 216
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Davies same
03/20/2024	Payee name Luckey, Desiree
Amount (\$)	Payee address; City; State; Zip Code
\$1,568.29	233 Howard Street, Apt 216
Expenditure from	
corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll
	Fayron
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 87/115 Rpt:	Texas Democratic Party 00015831
-	
4 Date	5 Payee name
04/26/2024	Luckey, Desiree
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$53.76	233 Howard Street, Apt 216
Expenditure from corporate funds	San Antonio, TX 78212
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Mileage
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
04/26/2024	Luckey, Desiree
Amount (\$)	Payee address; City; State; Zip Code
\$1,568.29	233 Howard Street, Apt 216
•	
Expenditure from	Can Antonia TV 70212
corporate funds	San Antonio, TX 78212
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
	Check if Austin, TX, officeholder living expense Payroll
	1 ayron
0 1: 0 1 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	
Date	Payee name
05/31/2024	Luckey, Desiree
Amount (\$)	Payee address; City; State; Zip Code
\$125.00	233 Howard Street, Apt 216
+==3.00	
Expenditure from	Can Antonia TV 70010
corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Stipend
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/OI	·

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 88/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/17/2024	Lyft
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.76	568 Brannan St
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Transportation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	·
Date	Payee name
06/17/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$13.92	568 Brannan St
Expenditure from	San Francisco, CA 94107
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Transportation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Date	Payee name
06/17/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$8.58	568 Brannan St
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Transportation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries The Instruction Guide explains how to a	S/Wages/Contract Labor OTHER (enter a category not listed above) complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 89/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
05/20/2024	Lyft	
6 Amount (\$)	7 Payee address; City; State; Zip (Code
\$106.34	568 Brannan St	
Expenditure from corporate funds	San Francisco, CA 94107	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Transportation
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI		
Date	Payee name	
04/26/2024	Marriott International	
Amount (\$)	Payee address; City; State; Zip C	Code
\$172.72	Marriott Drive	
Expenditure from		
corporate funds	Washington, DC 20058	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging
		Loughig
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI		
Date	Payee name	
05/31/2024	Masterson, Maura	
Amount (\$)	Payee address; City; State; Zip C	Code
\$250.00	3320 Harmon Avenue, Apt. 552	
Expenditure from	Austin TV 7070F	
corporate funds	Austin, TX 78705	las -
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Stipend
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI		

SCHEDULE F1

Advertising Expense Eve Accounting/Banking Fee Consulting Expense Foo Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 90/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Nextiva
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.61	8800 E Chaparral Rd Suite 300
Expenditure from corporate funds	Scottsdale, AZ 85250
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Telephone
	Telephone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	
Date	Payee name
03/20/2024	Nguyen, Austin
Amount (\$)	Payee address; City; State; Zip Code
\$203.91	5427 North Lamar Blvd, Unit 3112
·	·
Expenditure from	Austin, TX 78751
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/26/2024	Nguyen, Austin
Amount (\$)	Payee address; City; State; Zip Code
\$394.68	5427 North Lamar Blvd, Unit 3112
Expenditure from corporate funds	Austin, TX 78751
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers	5)
Sch: 91/115 Rpt:	Texas Democratic Party	00015831	
4 Date	5 Payee name	•	
02/27/2024	Orrantia, Marco A		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$1,613.38	2400 E 6th St Apt 114		
- Considition from			
Expenditure from corporate funds	Austin, TX 78702		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Payroll	
		T dyfoli	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held	
expenditure to benefit C/O		5,100,1014	
Date	Payee name		
03/04/2024	Orrantia, Marco A		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$1,624.58	2400 E 6th St Apt 114	ouc	
Ψ1,024.00	2400 2 0th 6t / pt 114		
Expenditure from corporate funds	Austin, TX 78702		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held	
expenditure to benefit C/O	Н		
Date	Payee name		
03/04/2024	Orrantia, Marco A		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$1,624.57	2400 E 6th St Apt 114		
Expenditure from corporate funds	Austin, TX 78702		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
LAFENDITORE		Check if Austin, TX, officeholder living expense	
		Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held	
expenditure to benefit C/O		dince nelu	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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
Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 92/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
03/20/2024	Orrantia, Marco A	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	е
\$1,624.58	2400 E 6th St Apt 114	
Expenditure from corporate funds	Austin, TX 78702	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
		i ayıon
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O		onice neid
Date	Payee name	
04/26/2024	Orrantia, Marco A	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$1,624.58	2400 E 6th St Apt 114	
Expenditure from corporate funds	Austin, TX 78702	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
		i dyron
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O		office field
Date	Payee name	
05/31/2024	Orrantia, Marco A	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$250.00	2400 E 6th St Apt 114	
Expenditure from corporate funds	Austin, TX 78702	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Stipend
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	•	ht Office held
	•	ht Office held
	•	ht Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 93/115 Rpt:	Texas Democratic Party 00015831	
4	Date	5 Payee name	
	03/15/2024	Orta, Robert T	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,821.42	7407 Sunlight Lane	
	Expenditure from corporate funds	Houston, TX 77095	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Payroll Payroll	
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		_
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/28/2024	Orta, Robert T	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2,391.84	7407 Sunlight Lane	
	Expenditure from corporate funds	Houston, TX 77095	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Payroll	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	┨	
	Date	Payee name	=
	06/14/2024	Orta, Robert T	
		· · · · · · · · · · · · · · · · · · ·	
	Amount (\$)		
	\$2,391.83	7407 Sunlight Lane	
_	T Expenditure from		
L	corporate funds	Houston, TX 77095	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Payroll	
			_
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experience to beliefit 6/01	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 94/115 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
06/28/2024	Orta, Robert T	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$2,391.84	7407 Sunlight Lane	
E constitue de france		
Expenditure from corporate funds	Houston, TX 77095	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		i ayıon
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		Gille Held
Date		
03/20/2024	Payee name	
	Patton Data Processing	
Amount (\$)	Payee address; City; State; Zip Co	de
\$960.00	253 Blackthorn Drive	
Expenditure from		
corporate funds	Nicholasville, KY 40356	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Compliance Reporting Services
		23.4 m - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		•
Date	Payee name	
03/04/2024	Patton Data Processing	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$960.00	253 Blackthorn Drive	
Ψ300.00	200 Blackwich Brive	
Expenditure from corporate funds	Nicholasville, KY 40356	
		a) -
PURPOSE OF	, ,	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense
		Compliance Reporting Services
Complete ONLY if direct	Candidate/Officeholder name Office sout	ght Office held
expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 95/115 Rpt:	
-	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Patton Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$960.00	253 Blackthorn Drive
Expenditure from	Nicholasville, KY 40356
corporate funds	<u>,</u>
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Compliance Departing Continue
	Compliance Reporting Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
03/15/2024	Pfau, Victoria
Amount (\$)	
\$1,821.42	122 Roy Smith Street, Apt. 2237
Expenditure from	
corporate funds	San Antonio, TX 78215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	⊣
Data	Davis asses
Date	Payee name
03/28/2024	Pfau, Victoria
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	122 Roy Smith Street, Apt. 2237
Expenditure from corporate funds	San Antonio, TX 78215
PURPOSE	
OF	l
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 96/115 Rpt:	
4 Date	5 Payee name
06/14/2024	Pfau, Victoria
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,391.83	122 Roy Smith Street, Apt. 2237
Expenditure from	San Antonio, TX 78215
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
	l agron
O Complete ONLY if alice -4	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/28/2024	Pfau, Victoria
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	122 Roy Smith Street, Apt. 2237
+ =,00=.0 .	
Expenditure from	0 A TV 70045
corporate funds	San Antonio, TX 78215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to beliefit 6/6	'
Date	Payee name
02/27/2024	Pickering, Emma
Amount (\$)	Payee address; City; State; Zip Code
\$1,331.99	2413 Leon St #101
Ψ±,00±.00	
Expenditure from	A
corporate funds	Austin, TX 78705
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitie to belieff C/O	1

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cotogony pet listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
,	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 97/115 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
03/04/2024	Pickering, Emma	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,338.51	2413 Leon St #101	
Expenditure from corporate funds	Austin, TX 78705	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Salaries/Wages/Contract Labor	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
experiditure to benefit C/Oi		
Date	Payee name	
03/04/2024	Pickering, Emma	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,338.51	2413 Leon St #101	
Expenditure from corporate funds	Austin, TX 78705	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_
Date	Payee name	
03/20/2024	Pickering, Emma	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,338.51	2413 Leon St #101	
Expenditure from corporate funds	Austin, TX 78705	
PURPOSE		_
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Payroll	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		

SCHEDULE F1

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 98/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/26/2024	Pickering, Emma
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,338.51	2413 Leon St #101
Expenditure from corporate funds	Austin, TX 78705
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/31/2024	Pickering, Emma
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	2413 Leon St #101
Expenditure from corporate funds	Austin, TX 78705
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Stipend
	S.psu
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/26/2024	Pitney Bowes Global Financial Svc, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$209.70	PO BOX 371887
Expenditure from corporate funds	Pittsburgh, PA 15250
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Equipment
	Onice Equipment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
4 Tatal manage Calculula Ed.	· · · · · · · · · · · · · · · · · · ·	_				
1 Total pages Schedule F1:						
Sch: 99/115 Rpt:	Texas Democratic Party 00015831					
4 Date	5 Payee name					
03/04/2024	PlatePass.com					
6 Amount (\$)	7 Payee address; City; State; Zip Code	_				
\$55.18	1150 N Alma School Rd					
, , , ,						
Expenditure from	Moss A7 95201					
corporate funds	Mesa, AZ 85201					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Tolls					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
expenditure to benefit C/O						
		_				
Date	Payee name					
03/20/2024	PlatePass.com					
Amount (\$)	Payee address; City; State; Zip Code	Π				
\$55.18	1150 N Alma School Rd					
Expenditure from corporate funds	Mesa, AZ 85201					
		_				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxas, Complete Schedule T					
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Tolls					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
expenditure to benefit C/O						
_		_				
Date	Payee name					
03/15/2024	Prado, Abel					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,821.42	135 Paseo Del Prado, Suite 62					
Expenditure from corporate funds	Edinburg, TX 78539					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-				
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Payroll Payroll					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
expenditure to benefit C/O	1					
		-				
Forms provided by Tayas F	thics Commission www.athics.state.tv.us Version V// 1.0.d278abs	_				
LORDO DEOUGOO DU LOVOCE	thice Commission WAMA athics state ty us Varsion V// 1 0 d278ahs					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 100/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/28/2024	Prado, Abel
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,391.84	135 Paseo Del Prado, Suite 62
F	
Expenditure from corporate funds	Edinburg, TX 78539
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense Payroll
	T dyfoli
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
06/14/2024	Prado, Abel
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.83	135 Paseo Del Prado, Suite 62
Ψ2,001.00	100 1 4000 2011 1440, 0410 02
Expenditure from corporate funds	Edinburg, TX 78539
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
06/28/2024	Prado, Abel
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	135 Paseo Del Prado, Suite 62
Expenditure from corporate funds	Edinburg, TX 78539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll
	Γαγιοι
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 101/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
03/12/2024	Primm, Lynn
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$23,703.37	17840 FM 1841
— Forest diture from	
Expenditure from corporate funds	Atlanta, TX 75551
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Printing
	Filliding
O Committee Chillian in	Overflideta (Official telephone and Community
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/26/2024	Printhpro, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$37,096.63	9011 Tuscany Way
Expenditure from corporate funds	Austin, TX 78754
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
	Printing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
04/01/2024	Printhpro, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$23,703.37	9011 Tuscany Way
Expenditure from	
corporate funds	Austin, TX 78754
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Printing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Operations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 102/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	RPS Harlingen
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$11.20	3002 Heritage Way
- Funanditura from	
Expenditure from corporate funds	Harlingen, TX 78550
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Parking
	T WINING
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/26/2024	Payee name Richardson, Corrine
	· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address; City; State; Zip Code
\$124.12	11300 W Parmer Ln, Apt 814
Expenditure from	Coder Dark TV 79612
corporate funds	Cedar Park, TX 78613
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/31/2024	Richardson, Corrine
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	11300 W Parmer Ln, Apt 814
Ψ230.00	11300 W Latifici Ell, Apt 014
Expenditure from corporate funds	Cedar Park, TX 78613
	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 103/115 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
02/27/2024	Royal, Jenna	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$517.71	4612 Deer Valley Lane	
Evpanditure from		
Expenditure from corporate funds	Richardson, TX 75082	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	
	Payroll	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Date	Payee name	=
03/04/2024	Royal, Jenna	
		_
Amount (\$)		
\$1,331.83	4612 Deer Valley Lane	
Expenditure from		
corporate funds	Richardson, TX 75082	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	
	Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Dove nome	=
03/04/2024	Payee name Royal, Jenna	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$1,331.84	4612 Deer Valley Lane	
Expenditure from		
corporate funds	Richardson, TX 75082	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	
	Payroll	
	. 33.3	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	y	
		_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed a	above)
1 Total pages Schedule F1:	2 FILER NAME	<u> </u>				3	Filer ID	(Ethics Commis	sion Filers)
Sch: 104/115 Rpt:	Texas Dem	ocratic Party					00015831		
4 Date	5 Payee name								
03/20/2024	Royal, Jenr	na							
6 Amount (\$)	7 Payee addre	ss; City;	State; Zip C	Code					
\$1,331.83	4612 Deer	Valley Lane							
Expenditure from corporate funds	Richardson	, TX 75082							
8 PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
OF EXPENDITURE	Salaries/Wa	ages/Contract Labo	or		=		de of Texas. Com		
					Payroll	, 1,	officeholder living	expense	
					. ayron				
9 Complete ONLY if direct	Candidate/Off	iceholder name	Office so	<u> </u>			Office he	eld	
expenditure to benefit C/OI			000 00	, a.g			000 1		
Date	Payee name								
04/26/2024	Royal, Jenr								
Amount (\$)	Payee addre		State; Zip C	ode.					
\$1,331.83	1 1	Valley Lane	Otato, Zip C	Jouc					
Ψ1,001.00	4012 Beer	valley Larie							
Expenditure from corporate funds	Richardson	, TX 75082							
PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
OF EXPENDITURE	Salaries/Wa	ages/Contract Labo	or		=		de of Texas. Com		
					Payroll	, 17,	officeholder living	expense	
					. ayron				
Complete ONLY if direct	Candidate/Off	iceholder name	Office so	<u>l</u> ought			Office he	eld	
expenditure to benefit C/OI	Н								
Date	Payee name								
05/31/2024	Royal, Jenr	na							
Amount (\$)	Payee addre	ss; City;	State; Zip C	Code					
\$125.00	4612 Deer	Valley Lane							
Expenditure from corporate funds	Richardson	, TX 75082							
PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
OF EXPENDITURE	Event Expe	ense					de of Texas. Com	•	
					Stipend	, TX,	officeholder living	expense	
					Superiu				
Complete ONLY if direct	Candidate/Off	iceholder name	Office so	ught			Office he	eld	
expenditure to benefit C/OI			011100 00	g - 1 C			200 110	-· - -	
									0 1070 1 0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 105/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/14/2024	Sanders, James
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,932.40	5224 Washington Ave
Expenditure from corporate funds	Houston, TX 77007
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2024	Sandler, Reiff, Young & Lamb, PC
Amount (\$)	Payee address; City; State; Zip Code
\$768.00	1090 Vermont Ave., N.W.
*******	Suite 750
Expenditure from corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Legal Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/28/2024	Sandor, David R
Amount (\$)	Payee address; City; State; Zip Code
\$1,086.71	2510 Park St, Unit 3
φ1,000.71	2010 Faik St, Othit 3
Expenditure from corporate funds	Brooklyn, NY 11704
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiental to belieff C/O	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 106/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	Shred-it USA LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$49.38	PO Box 101007
Expenditure from	
corporate funds	Pasadena, CA 91189
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Shredding Services
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Shred-it USA LLC
Amount (\$)	Payee address; City; State; Zip Code
\$49.38	PO Box 101007
Expenditure from corporate funds	Pasadena, CA 91189
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Shredding Services
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2024	Southwest Airlines
Amount (\$)	Payee address; City; State; Zip Code
\$359.65	PO Box 36611
Expenditure from corporate funds	Dallas, TX 75235
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Transportation
	Hansportation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 107/115 Rpt:	Texas Democratic Party 00015831					
4 Date	5 Payee name					
05/07/2024	Southwest Airlines					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$359.65	PO Box 36611					
- "						
Expenditure from corporate funds	Dallas, TX 75235					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Transportation					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O						
Date	Payros namo					
05/20/2024	Payee name Spot Hero					
	<u> </u>					
Amount (\$)	Payee address; City; State; Zip Code					
\$41.95	125 S. Clark St					
Expenditure from corporate funds	Chicago, IL 60603					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Parking					
	raining					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O						
Date	Payee name					
05/07/2024	Sprout Social					
Amount (\$)	Payee address; City; State; Zip Code					
\$53.93	30 N Racine Avenue					
Expenditure from						
corporate funds	Chicago, IL 60607					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Software					
	Solividio					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 108/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
06/05/2024	Staging Solutions Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$75,000.00	ATTN: Aaron Avellanosa
	2014 Lou Ellen Ln
Expenditure from corporate funds	Houston, TX 77018
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event Production Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experioritire to benefit C/Oi	
Date	Payee name
06/11/2024	Staging Solutions Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	ATTN: Aaron Avellanosa
	2014 Lou Ellen Ln
Expenditure from corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event Production Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	
Date	Payee name
04/26/2024	Staging Solutions Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$69,947.50	ATTN: Aaron Avellanosa
	2014 Lou Ellen Ln
Expenditure from corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
LAFLINDITUKE	Check if Austin, TX, officeholder living expense
	Event Production Services
Commission ONU V. V. V.	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 109/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
04/26/2024	Taylor, Shelby
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$94.08	4211 Brightridge Ct
Expenditure from corporate funds	Rosenberg, TX 77471
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Mileage
	Willeage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/17/2024	The Parking Spot - PRG Parking Management LLC
Amount (\$)	Payee address; City; State; Zip Code
\$58.91	28 Northern Avenue
Expenditure from corporate funds	Boston, MA 02210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Cry Category (See Categories listed at the top of this schedule) Event Expense Cry Category (See Categories listed at the top of this schedule) Cry Category (See Categories listed at the top of this schedule)
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Parking
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/07/2024	Twitter
Amount (\$)	Payee address; City; State; Zip Code
\$58.06	1355 Market St, Suite 900
Ψ00.00	1000 Market Ot, Guite 300
Expenditure from	0 5
corporate funds	San Francisco, CA 94103
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Software
	Solivaio
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 110/115 Rpt:	Texas Democratic Party 00015831					
4 Date	Payee name					
05/07/2024	US Postmaster					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$174.08	8225 Cross Park Dr					
Expenditure from corporate funds	Austin, TX 78710					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
-	Check if Austin, TX, officeholder living expense Postage - Administrative					
	Postage - Autilitistrative					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9 Complete ONLY if direct expenditure to benefit C/OI						
Date	Payee name					
05/07/2024	Uber					
Amount (\$)	Payee address; City; State; Zip Code					
\$6.39	182 Howard St #8					
Expenditure from corporate funds	San Francisco, CA 94102					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense					
	Transportation					
Commission ONLL V if dispose	Condidate/Officeholder name Office pought Office hold					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
06/17/2024	Uber					
Amount (\$)	Payee address; City; State; Zip Code					
\$7.59	182 Howard St #8					
Expenditure from corporate funds	San Francisco, CA 94102					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Transportation					
	Παποροιτατίοπ					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI	•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salar The Instruction Guide explains how to	ies/Wages/Contract Labor OTHER (enter a category not listed above) o complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 111/115 Rpt:	Texas Democratic Party	00015831				
4 Date	5 Payee name					
06/17/2024	Uber					
6 Amount (\$)	7 Payee address; City; State; Zip	Code				
\$7.59	182 Howard St #8					
Expenditure from corporate funds	San Francisco, CA 94102					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.				
EXI ENDITORE		Check if Austin, TX, officeholder living expense				
		Transportation				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held				
experialitie to belieff C/O	п					
Date	Payee name					
06/17/2024	Uber					
Amount (\$)	Payee address; City; State; Zip	Code				
\$15.90	182 Howard St #8					
,						
Expenditure from corporate funds	San Francisco, CA 94102					
PURPOSE		(b) Description				
OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	TURE Travel in District Check if Austin, TX, officeholder living expense					
	Transportation					
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held				
expenditure to benefit C/O	Н					
Date	Payee name					
04/23/2024	Uber					
Amount (\$)	Payee address; City; State; Zip	Code				
\$32.75	182 Howard St #8	Code				
Ψ32.73	102 Howard St #6					
Expenditure from						
corporate funds	San Francisco, CA 94102					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Transportation				
		Tansportation				
Complete CMLV if diret	Condidate/Officeholder 75 775	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held				
,						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 112/115 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
05/07/2024	WeTransfer
6 Amount (\$) \$7.68	7 Payee address; City; State; Zip Code 751 Oostelijke Handelskade
Expenditure from corporate funds	Amsterdam, AE 00000
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2024	Webb, Xaq
Amount (\$)	Payee address; City; State; Zip Code
\$960.91	404 Vista Portola Loop
Expenditure from corporate funds	Liberty Hill, TX 78642
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Webb, Xaq
Amount (\$)	Payee address; City; State; Zip Code
\$963.63	404 Vista Portola Loop
Expenditure from corporate funds	Liberty Hill, TX 78642
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVDENDITUDE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete CAU V Station	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this	` · · · · · · · · · · · · · · · · · · ·				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 113/115 Rpt:	Texas Democratic Party	00015831				
4 Date	5 Payee name					
03/04/2024	Webb, Xaq					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$963.63	404 Vista Portola Loop					
Expenditure from corporate funds	Liberty Hill, TX 78642					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	iption				
OF EXPENDITURE	Galaires, Wages, Geriti act Laber	eck if travel outside of Texas. Complete Schedule T.				
		eck if Austin, TX, officeholder living expense				
	Payro	OII				
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
03/20/2024	Webb, Xaq					
Amount (\$)	Payee address; City; State; Zip Code					
\$963.62	404 Vista Portola Loop					
	·					
Expenditure from corporate funds	Liberty Hill, TX 78642					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	iption				
OF EXPENDITURE	Salaries/ Wages/Contract Labor	eck if travel outside of Texas. Complete Schedule T.				
-	Cneck if Austin, 1X, officenoider living expense					
	Payro	OII				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
04/26/2024	Webb, Xaq					
Amount (\$)	Payee address; City; State; Zip Code					
\$963.63	404 Vista Portola Loop					
Expenditure from corporate funds	Liberty Hill, TX 78642					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	iption				
OF EXPENDITURE	Salaries/Wages/Cortifact Eabor	cck if travel outside of Texas. Complete Schedule T.				
2/4 2/15/10/1C		eck if Austin, TX, officeholder living expense				
	Payro	DII _				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
experialitie to beliefft C/OI						
<u></u>						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment		OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)				
Sch: 114/115 Rpt:	Texas Democratic Party 00015831					
4 Date	5 Payee name					
05/31/2024	Webb, Xaq					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$250.00	404 Vista Portola Loop					
Expenditure from corporate funds	Liberty Hill, TX 78642					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Stipend					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/26/2024	Wilkison, Charles B					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,249.17	2401 Aldrich Street, Unit 160					
Expenditure from corporate funds	Austin, TX 78723					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense					
	Payroll					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
05/31/2024	Wilkison, Charles B					
Amount (\$)	Payee address; City; State; Zip Code					
\$250.00	2401 Aldrich Street, Unit 160					
Ψ230.00	2401 Alunch Street, Onlt 100					
Expenditure from corporate funds	Austin, TX 78723					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
EXI ENDITORE	Check if Austin, TX, officeholder living expense					
	Stipend					
0 1. 6						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	=)		
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	Filers)		
Sch: 115/115 Rpt:	Texas Democratic Party 00015831			
4 Date	5 Payee name			
04/30/2024	Worley Printing Co., Inc.			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$130.98				
Ψ130.30	3217 N. 117 33			
Expenditure from corporate funds	Austin, TX 78722			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Printing Expense			
EXI ENDITORE	Check if Austin, TX, officeholder living expense			
	Printing			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	ווע			
Date	Payee name			
05/07/2024	Zoom.com			
Amount (\$)	Payee address; City; State; Zip Code			
\$53.89				
დე ე.09	33 Almaden bivu			
Expenditure from corporate funds	San Jose, CA 95113			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Office Overhead/Rental Expense			
EXI ENDITORE	Check if Austin, TX, officeholder living expense			
	Subscription			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	JH			

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/2 Rpt: 174/179 **Texas Democratic Party** 00015831 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/08/2024 Game Plan Strategies, LLC Amount (\$) Payee address; City; State; Zip Code \$32,384.60 117 9th St Expenditure from Washington, DC 20002 corporate funds **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Consulting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/08/2024 Horizon Printing Amount (\$) Payee address; City; State; Zip Code \$13,312.59 2111 Grand Avenue Parkway Expenditure from corporate funds Austin, TX 78728 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Printing - Event Programs Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/2 Rpt: 175/179 **Texas Democratic Party** 00015831 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/08/2024 Staging Solutions Inc. Amount (\$) Payee address; State; Zip Code \$276,659.00 2014 Lou Ellen Ln Expenditure from Houston, TX 77018 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event Production Management** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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.							
1 T	otal pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	3 Filer ID (Ethics Commission Filers)		
S	Sch: 1/3 Rpt: 176/179	Texas Democratic Party				00015831		
4 CREDIT CARD		Name of financial institution			OF UNITEMIZED	_		
18	SSUER	First National I	Bank of Omaha	EXPENDITURES CHARGED TO A CREDIT CARD		. \$		
6 F	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	Expenditure from corporate funds	\$22.73	05/24/2024	05/31/20	24			
7 F	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Amazon.com		PO Box 80463				
				Seattle, \	NA 98108			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Descri				
	EXPENDITURE	Event Expense	of this scriedule)	Event Su	ipplies			
	X Political	•						
	Non-Political	` 1	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
<u> </u>	enditure to benefit C/OH	(a) A	(h) Data at Obania	(-) D -+- (-)	0 114 0 1 1	- D-i-l		
	PAYMENT Expenditure from	(a) Amount Charged	(b) Date of Charge	05/31/20) Credit Card Issue 124	r Pala		
	corporate funds	\$337.96	05/08/2024	00/01/20				
F	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Southwest Airlines		36611				
					\			
<u> </u>	PURPOSE OF (a) Category (b) Description							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Transpor				
	X Political	Event Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	, officeholder living exp	noneo	
<u> </u>	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check ii Austin, 17.	Office held		
	enditure to benefit C/OH			J				
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	Credit Card Issue	r Paid		
	Expenditure from	\$1,038.60	05/16/2024	05/31/20	24			
	corporate funds	, ,						
F	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Amazan aam		PO Box 80463				
		Amazon.com						
<u> </u>	WIDDOOF OF	(a) Cataman			NA 98108			
	PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule) Front Supplies						
	X Political	(See Categories listed at the top of this schedule) Event Expense Event Supplies						
	Non-Political							
\vdash		(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held						
	Complete ONLY if direct enditure to benefit C/OH	Candidate/Officeriolider	name Office	c sought		Onice Held		
<u> </u>	2 12.12 12 120.10.11 2,011							

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:				3 Filer ID (Ethics	Commiss	sion Filers)	
1	Sch: 2/3 Rpt: 177/179	Texas Democratic Party			00015831			
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	Expenditure from corporate funds	\$39.99	05/27/2024	05/31/2024				
7	PAYEE	(a) Payee name Amazon.com		(b) Payee address; PO Box 80463	City,	State,	Zip Code	
Ļ	DUDDOCE OF	(a) Catagony		Seattle, WA 98108 (b) Description				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	Event Supplies				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	Expenditure from corporate funds	\$159.10	05/21/2024	05/31/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Office Depot - Corporate		Office Depot 2200 Old Germantown Road Delray Beach, FL 33445				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Event Supplies				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT Expenditure from corporate funds	(a) Amount Charged \$300.95	(b) Date of Charge 05/08/2024	(c) Date(s) Credit Card Issue 05/31/2024	r Paid			
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Southwest Airlines		PO Box 36611				
L		() 2		Dallas, TX 75235				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Transportation				
	Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
\vdash	Ш	(c) Check if travel outside Candidate/Officeholder	·	e sought	Office held	1156		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	Tiane Office	o oougrit	Office Held			
l								

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

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

	Candidate/Officeholder/Politica		ces Sa		THER (enter a category not listed above)		
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)		
	Sch: 3/3 Rpt: 178/179	Texas Democratic F	Party		00015831		
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER	see pr	evious	EXPENDITURES CHARGED TO A CREDIT	\$		
				CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Paid		
	Expenditure from corporate funds	\$322.97	05/09/2024	05/31/2024			
	corporate funds						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Southwest Airlines		PO Box 36611			
		Southwest Allines					
				Dallas, TX 75235			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Event Expense	or time corregality	Transportation			
	X Political						
L	Non-Political		of Texas. Complete Schedule T.		officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held		
L e	xpenditure to benefit C/OH						
l							
l							
•							

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 179/179 2 FILER NAME Filer ID (Ethics Commission Filers) **Texas Democratic Party** 00015831 8 Amount (\$) Date 5 Name of person from whom amount is received 06/21/2024 Hotel Paso Del Norte \$1,293.87 6 Address of person from whom amount is received; City; State; Zip Code El Paso, TX 79901 Purpose for which amount is received Check if political contribution returned to filer Refund Amount (\$) Date Name of person from whom amount is received 03/01/2024 Printhpro, LLC \$95,000.00 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78754 Purpose for which amount is received Check if political contribution returned to filer Refund Date Name of person from whom amount is received Amount (\$) 04/26/2024 Texas Democratic Party - Federal Account \$28,792.67 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78752 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for Postage