

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087094	2 Total pages filed: 260
3 COMMITTEE NAME Every State Blue - Texas		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 237 Florida Avenue NW Washington, DC 20001		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jonathan	MI
	NICKNAME	LAST Zucker	SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 237 Florida Avenue NW Washington, DC 20001		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 237 Florida Avenue NW Washington, DC 20001		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 237 Florida Avenue NW Washington, DC 20001		
	AREA CODE PHONE NUMBER EXTENSION (202) 656-5645		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2024 THROUGH 06/30/2024		
	11 ELECTION ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Every State Blue - Texas	13 Filer ID (Ethics Commission Filers) 00087094
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,000.24
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,261.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 16,044.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Jonathan Zucker

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 260

17 COMMITTEE NAME Every State Blue - Texas		18 Filer ID (Ethics Commission Filers) 00087094
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,000.24
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,261.91
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 90.25
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/252 Rpt: 4/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> 6 Contributor address; City; State; Zip Code Vallejo, CA 94589	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) None
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94589	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/252 Rpt: 5/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Desiree <hr/> 6 Contributor address; City; State; Zip Code Vallejo, CA 94589	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) None
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amron, Cory <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201	Amount of Contribution (\$) \$5.00
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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
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Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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6 Contributor address; City; State; Zip Code Dallas, TX 75287		
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Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westlake Village, CA 91361		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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6 Contributor address; City; State; Zip Code Westlake Village, CA 91361		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westlake Village, CA 91361		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westlake Village, CA 91361		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett, M. James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westlake Village, CA 91361		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Corbett, OR 97019		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/252 Rpt: 10/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/252 Rpt: 12/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> 6 Contributor address; City; State; Zip Code Corbett, OR 97019	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aunan, Lauri <hr/> Contributor address; City; State; Zip Code Corbett, OR 97019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/252 Rpt: 13/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Berkeley, CA 94707		
8 Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) retired teacher
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
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8 Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) retired teacher
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/252 Rpt: 15/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$5.00
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Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 06/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/252 Rpt: 16/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) retired teacher
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/252 Rpt: 17/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Paylocity
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/252 Rpt: 18/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Paylocity
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batra, Nikhil	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Paylocity
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/252 Rpt: 19/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Calvary Episcopal School
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	Amount of Contribution (\$) \$2.50
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Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/252 Rpt: 20/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Calvary Episcopal School
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Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
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Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
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Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School
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Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Calvary Episcopal School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/252 Rpt: 21/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76005	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Consulting Engineer		9 Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/252 Rpt: 22/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Arlington, TX 76005		
8 Principal occupation / Job title (See Instructions) Consulting Engineer		9 Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76005		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Grant	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Arlington, TX 76005		
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/252 Rpt: 23/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/252 Rpt: 24/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernabei, Gretchen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Self
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernabei, Gretchen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/252 Rpt: 25/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) <div style="text-align: right;">\$12.50</div>
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) <div style="text-align: right;">\$3.75</div>
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) <div style="text-align: right;">\$12.50</div>
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) <div style="text-align: right;">\$3.75</div>
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) <div style="text-align: right;">\$12.50</div>
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/252 Rpt: 26/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code Midland, TX 79705		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Midland, TX 79705		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Midland, TX 79705		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Midland, TX 79705		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadrick, Cathy	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Midland, TX 79705		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/252 Rpt: 27/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Evanston, IL 60201		
8 Principal occupation / Job title (See Instructions) Clinical social worker		9 Employer (See Instructions) Self
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Evanston, IL 60201		
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Evanston, IL 60201		
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Evanston, IL 60201		
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Evanston, IL 60201		
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/252 Rpt: 28/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruski, Nancy <hr/> 6 Contributor address; City; State; Zip Code Evanston, IL 60201	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Clinical social worker		9 Employer (See Instructions) Self
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/252 Rpt: 29/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> 6 Contributor address; City; State; Zip Code Larchmont, NY 10538	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Clifford Chance
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Erika <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Clifford Chance
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/252 Rpt: 30/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/252 Rpt: 31/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carafiol, Robyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Robinson Clay Inc.
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/252 Rpt: 32/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/252 Rpt: 33/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/252 Rpt: 34/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) JP Morgan Chase
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JP Morgan Chase
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Joanna <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT support		Employer (See Instructions) The University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/252 Rpt: 35/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Joanna	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78765		
8 Principal occupation / Job title (See Instructions) IT support		9 Employer (See Instructions) The University of Texas at Austin
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/252 Rpt: 36/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code New York, NY 10011		
8 Principal occupation / Job title (See Instructions) artist		9 Employer (See Instructions) self
Date 03/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 04/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 04/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 05/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/252 Rpt: 37/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Melissa <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) artist		9 Employer (See Instructions) self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/252 Rpt: 38/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted	Amount of Contribution (\$) \$2.25
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted	Amount of Contribution (\$) \$2.25
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/252 Rpt: 39/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2.25
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Included Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/252 Rpt: 40/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Jonathan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Included Health
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/252 Rpt: 41/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Currently unemployed
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Currently unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/252 Rpt: 42/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Megan <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Currently unemployed
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/252 Rpt: 43/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Weaver
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Weaver

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/252 Rpt: 44/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code Kingwood, TX 77345		
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Weaver
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/252 Rpt: 45/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 03/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/252 Rpt: 46/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Artost		9 Employer (See Instructions) Self
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/252 Rpt: 47/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artost		Employer (See Instructions) Self
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78745		
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/252 Rpt: 48/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Austin, TX 78745		
8 Principal occupation / Job title (See Instructions) HR Specialist		9 Employer (See Instructions) Texas Department of Banking
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78745		
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78745		
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78745		
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78745		
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/252 Rpt: 49/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR Specialist		9 Employer (See Instructions) Texas Department of Banking
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couvillion, Karyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) Texas Department of Banking
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/252 Rpt: 50/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covington, Leslee <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/252 Rpt: 51/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Karen <hr/> 6 Contributor address; City; State; Zip Code El Cerrito, CA 94530	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Karen <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Karen <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Karen <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/252 Rpt: 52/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Tinker <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/252 Rpt: 53/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/252 Rpt: 54/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culbertson, Amy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> Contributor address; City; State; Zip Code Rossharon, TX 77583	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> Contributor address; City; State; Zip Code Rossharon, TX 77583	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> Contributor address; City; State; Zip Code Rossharon, TX 77583	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> Contributor address; City; State; Zip Code Rossharon, TX 77583	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/252 Rpt: 55/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Rosharon, TX 77583		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Rosharon, TX 77583		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Rosharon, TX 77583		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Rosharon, TX 77583		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Rosharon, TX 77583		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/252 Rpt: 56/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> 6 Contributor address; City; State; Zip Code Rosharon, TX 77583	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/252 Rpt: 57/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/252 Rpt: 58/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVinny, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/252 Rpt: 59/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> 6 Contributor address; City; State; Zip Code Bakersfield, CA 93309	7 Amount of Contribution (\$) \$3.63
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) The California State University
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/252 Rpt: 60/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> 6 Contributor address; City; State; Zip Code Bakersfield, CA 93309	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) The California State University
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
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Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309	Amount of Contribution (\$) \$3.63
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) The California State University
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/252 Rpt: 61/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code Plano, TX 75093		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Desiree	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/252 Rpt: 62/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) retired
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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/252 Rpt: 65/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Austin, TX 78717		
8 Principal occupation / Job title (See Instructions) BSA		9 Employer (See Instructions) RGA
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Amanda	Amount of Contribution (\$) \$1.00
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Principal occupation / Job title (See Instructions) BSA		Employer (See Instructions) RGA
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8 Principal occupation / Job title (See Instructions) BSA		9 Employer (See Instructions) RGA
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn <hr/> Contributor address; City; State; Zip Code Saginaw, TX 76179	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
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Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat

MONETARY POLITICAL CONTRIBUTIONS

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Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Carlyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Saginaw, TX 76179		
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Standard Meat
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871		
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871		
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/252 Rpt: 70/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) home repair		9 Employer (See Instructions) self
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$1.50
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Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) home repair		Employer (See Instructions) self
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/252 Rpt: 74/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired Spanish professo		9 Employer (See Instructions) retired
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

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Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foerster, Sharon <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired Spanish professo		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/252 Rpt: 76/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freimann, Vicki <hr/> 6 Contributor address; City; State; Zip Code La Canada, CA 91011	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney retired		9 Employer (See Instructions) N/a
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/252 Rpt: 77/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> 6 Contributor address; City; State; Zip Code THE COLONY, TX 75056	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		9 Employer (See Instructions) Mobomo LLC
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/252 Rpt: 78/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code THE COLONY, TX 75056		
8 Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		9 Employer (See Instructions) Mobomo LLC
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code THE COLONY, TX 75056		
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Dale	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code THE COLONY, TX 75056		
Principal occupation / Job title (See Instructions) Web Developer and Systems Administrator		Employer (See Instructions) Mobomo LLC
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Manchaca, TX 78652		
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Manchaca, TX 78652		
Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/252 Rpt: 79/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> 6 Contributor address; City; State; Zip Code Manchaca, TX 78652	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Chief of Stuff for Pat Kirkland Leadership		9 Employer (See Instructions) Self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/252 Rpt: 80/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.80
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/252 Rpt: 81/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Edna	7 Amount of Contribution (\$) \$1.80
6 Contributor address; City; State; Zip Code Lakeway, TX 78734		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ljamsville, MD 21754		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code ljamsville, MD 21754		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ljamsville, MD 21754		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code ljamsville, MD 21754		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/252 Rpt: 82/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie 6 Contributor address; City; State; Zip Code Ijamsville, MD 21754	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie Contributor address; City; State; Zip Code Ijamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie Contributor address; City; State; Zip Code Ijamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie Contributor address; City; State; Zip Code Ijamsville, MD 21754	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie Contributor address; City; State; Zip Code Ijamsville, MD 21754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/252 Rpt: 83/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Melanie	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code ljamsville, MD 21754		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/252 Rpt: 84/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78240		
8 Principal occupation / Job title (See Instructions) Insurance broker		9 Employer (See Instructions) Self employed
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/252 Rpt: 85/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78240		
8 Principal occupation / Job title (See Instructions) Insurance broker		9 Employer (See Instructions) Self employed
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jesse	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) Self employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/252 Rpt: 86/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78247		
8 Principal occupation / Job title (See Instructions) project manager		9 Employer (See Instructions) UTSA
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Lisha	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78247		
Principal occupation / Job title (See Instructions) project manager		Employer (See Instructions) UTSA
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Malden, MA 02148		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/252 Rpt: 87/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Malden, MA 02148		
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) NGP VAN
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Malden, MA 02148		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Malden, MA 02148		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Malden, MA 02148		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Malden, MA 02148		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/252 Rpt: 88/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> 6 Contributor address; City; State; Zip Code Malden, MA 02148	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) NGP VAN
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NGP VAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/252 Rpt: 89/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Alicia <hr/> 6 Contributor address; City; State; Zip Code Malden, MA 02148	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) NGP VAN
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goette, Edna <hr/> Contributor address; City; State; Zip Code Port Isabel, TX 78578	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) retired
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/252 Rpt: 90/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75701	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/252 Rpt: 91/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Tyler, TX 75701		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Greg	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Tyler, TX 75701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/252 Rpt: 92/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired Nurse Practitioner		9 Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) retired Nurse Practitioner		9 Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
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Principal occupation / Job title (See Instructions) retired Nurse Practitioner		Employer (See Instructions) retired

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, Travis <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Hydrocarbon Data Systems Inc.
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, Travis <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Hydrocarbon Data Systems Inc.

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, Travis <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77065	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Hydrocarbon Data Systems Inc.
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, Travis <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Hydrocarbon Data Systems Inc.
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Lexington, TX 78947		
8 Principal occupation / Job title (See Instructions) bookkeeper		9 Employer (See Instructions) self
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lexington, TX 78947		
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Lexington, TX 78947		
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
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8 Principal occupation / Job title (See Instructions) bookkeeper		9 Employer (See Instructions) self
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holton, Mariah <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) self
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulit, Carol <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33155	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 03/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Austin, TX 78751		
8 Principal occupation / Job title (See Instructions) VOLUNTEERISM		9 Employer (See Instructions) RETIRED
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil	Amount of Contribution (\$) \$12.50
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Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED

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8 Principal occupation / Job title (See Instructions) VOLUNTEERISM		9 Employer (See Instructions) RETIRED
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) VOLUNTEERISM		Employer (See Instructions) RETIRED
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Phillip <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/252 Rpt: 106/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	7 Amount of Contribution (\$) \$0.50
6 Contributor address; City; State; Zip Code Hull, TX 77564		
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions) Government
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Hull, TX 77564		
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Hull, TX 77564		
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Hull, TX 77564		
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Hull, TX 77564		
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Government

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/252 Rpt: 107/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lamont	7 Amount of Contribution (\$) \$0.50
6 Contributor address; City; State; Zip Code Hull, TX 77564		
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions) Government
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nathan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Health System Specialist		Employer (See Instructions) US Army
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nathan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Health System Specialist		Employer (See Instructions) US Army
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nathan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Health System Specialist		Employer (See Instructions) US Army
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Spicewood, TX 78669		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code Spicewood, TX 78669	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl 6 Contributor address; City; State; Zip Code Katy, TX 77450	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Project Director		9 Employer (See Instructions) UT MD Anderson
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonsson, Karl Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Director		Employer (See Instructions) UT MD Anderson
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Houston, TX 77096		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$5.00
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Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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4 Date 06/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 03/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94022	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) self
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Los Altos, CA 94022		
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) self
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurvetson, Karla	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/252 Rpt: 116/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734	7 Amount of Contribution (\$) \$2.00
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Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$10.00
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4 Date 01/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78255	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78255		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78255		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78255		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78255		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallick, Walter	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78255		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/252 Rpt: 121/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Construction		9 Employer (See Instructions) Kennedy A Plus Builders
Date 03/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 03/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 04/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 04/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/252 Rpt: 122/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$5.00
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Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Kennedy A Plus Builders
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mary Sue <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) public school librarian		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/252 Rpt: 123/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mary Sue <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) public school librarian		9 Employer (See Instructions) retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mary Sue <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) public school librarian		Employer (See Instructions) retired
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mary Sue <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) public school librarian		Employer (See Instructions) retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa <hr/> Contributor address; City; State; Zip Code Washington DC, DC 20011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa <hr/> Contributor address; City; State; Zip Code Washington DC, DC 20011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/252 Rpt: 124/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Washington DC, DC 20011		
8 Principal occupation / Job title (See Instructions) Communication specialist		9 Employer (See Instructions) Self
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Washington DC, DC 20011		
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Washington DC, DC 20011		
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Melissa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Washington DC, DC 20011		
Principal occupation / Job title (See Instructions) Communication specialist		Employer (See Instructions) Self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code The Woodlands, TX 77382		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/252 Rpt: 125/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code The Woodlands, TX 77382		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code The Woodlands, TX 77382		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/252 Rpt: 126/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Disabled		9 Employer (See Instructions) N/A
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code CONROE, TX 77301		
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Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkin, Antoinette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CONROE, TX 77301		
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) N/A
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/252 Rpt: 128/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code New York, NY 10012		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
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Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/252 Rpt: 130/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Guy <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10012	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78232		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lima, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/252 Rpt: 133/260
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4 Date 03/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	7 Amount of Contribution (\$) \$9.00
6 Contributor address; City; State; Zip Code Dallas, TX 75230		
8 Principal occupation / Job title (See Instructions) Asset Manager		9 Employer (See Instructions) West Rock Properties
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$2.70
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$2.70
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Asset Manager		Employer (See Instructions) West Rock Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/252 Rpt: 134/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litoff, AustinW	7 Amount of Contribution (\$) \$2.70
6 Contributor address; City; State; Zip Code Dallas, TX 75230		
8 Principal occupation / Job title (See Instructions) Asset Manager		9 Employer (See Instructions) West Rock Properties
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> 6 Contributor address; City; State; Zip Code GRANBURY, TX 76049	7 Amount of Contribution (\$) \$2.00
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Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwick, Al & Jean <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Pecan Drug
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/252 Rpt: 136/260
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Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDougal, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) lead software engineer		Employer (See Instructions) Rapid7

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Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$1.00
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Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marak, Deborah <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marak, Deborah <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Marston <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Marston <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Marston <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Austin, TX 78751	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Austin, TX 78751	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene	Amount of Contribution (\$) \$10.00
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Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Marlene	Amount of Contribution (\$) \$1.50
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Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Ann <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$5.00
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Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI

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Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cyral	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Special Ed consultant		Employer (See Instructions) TSBVI
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/252 Rpt: 151/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/252 Rpt: 152/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
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Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> 6 Contributor address; City; State; Zip Code Commercer, TX 75428	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired educator		9 Employer (See Instructions) None
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne <hr/> Contributor address; City; State; Zip Code Commercer, TX 75428	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Anne	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Commerce, TX 75428		
Principal occupation / Job title (See Instructions) Retired educator		Employer (See Instructions) None
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Flower Mound, TX 75028		
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Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mittelstet, Sandra	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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6 Contributor address; City; State; Zip Code Trophy Club, TX 76262		
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Self employed
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$2.25
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	7 Amount of Contribution (\$) \$2.25
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Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
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Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$2.25
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 04/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired

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4 Date 05/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$1.00
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Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie <hr/> Contributor address; City; State; Zip Code Trophy Club, TX 76262	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Voting rights activist		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/252 Rpt: 162/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

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Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
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Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O Neill, Sarah <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC

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Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/252 Rpt: 166/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Editor and project manager		9 Employer (See Instructions) ION Translations LLC
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obi, Trudy <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Editor and project manager		Employer (See Instructions) ION Translations LLC
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/252 Rpt: 167/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> 6 Contributor address; City; State; Zip Code Altadena, CA 91001	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, MARGARET <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/252 Rpt: 168/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
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Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Ben	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 90065		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay	Amount of Contribution (\$) \$5.00
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Date 06/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kay <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Meeting Consultant		Employer (See Instructions) Self Employed
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/252 Rpt: 173/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> 6 Contributor address; City; State; Zip Code Alhambra, CA 91803	7 Amount of Contribution (\$) \$11.91
8 Principal occupation / Job title (See Instructions) Safety Professional		9 Employer (See Instructions) Jacobs
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Daniel <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91803	Amount of Contribution (\$) \$11.91
Principal occupation / Job title (See Instructions) Safety Professional		Employer (See Instructions) Jacobs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/252 Rpt: 174/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> 6 Contributor address; City; State; Zip Code Burlingame, CA 94010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Senior Paralegal		9 Employer (See Instructions) Miller & Olson LLP
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson LLP
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Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson LLP

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4 Date 06/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> 6 Contributor address; City; State; Zip Code Burlingame, CA 94010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Senior Paralegal		9 Employer (See Instructions) Miller & Olson LLP
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pessner, Kirk <hr/> Contributor address; City; State; Zip Code Burlingame, CA 94010	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Senior Paralegal		Employer (See Instructions) Miller & Olson LLP
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portugal, David <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Memorial Hermann
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portugal, David <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Memorial Hermann
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portugal, David <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Memorial Hermann

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4 Date 05/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portugal, David	7 Amount of Contribution (\$) \$2.25
6 Contributor address; City; State; Zip Code Bellaire, TX 77401		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Memorial Hermann
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Bend IN, IN 46617		
Principal occupation / Job title (See Instructions) Product		Employer (See Instructions) Collectors Holdings
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Bend IN, IN 46617		
Principal occupation / Job title (See Instructions) Product		Employer (See Instructions) Collectors Holdings
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Bend IN, IN 46617		
Principal occupation / Job title (See Instructions) Product		Employer (See Instructions) Collectors Holdings
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteat, Cyrus	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Bend IN, IN 46617		
Principal occupation / Job title (See Instructions) Product		Employer (See Instructions) Collectors Holdings

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> 6 Contributor address; City; State; Zip Code Highland Park, IL 60035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyrka, Gloria J <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raybuck, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wimberley, TX 78676		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raybuck, Susan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Wimberley, TX 78676		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raybuck, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wimberley, TX 78676		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raybuck, Susan	Amount of Contribution (\$) \$1.00
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/252 Rpt: 180/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Austin, TX 78717		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NXP Semiconductors
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/252 Rpt: 181/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Austin, TX 78717		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NXP Semiconductors
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reber, Douglas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NXP Semiconductors
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichman, Henry	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Albany, CA 94706		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sherwood Forest, MD 21405		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/252 Rpt: 182/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> 6 Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kate <hr/> Contributor address; City; State; Zip Code Sherwood Forest, MD 21405	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 01/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/252 Rpt: 183/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/252 Rpt: 184/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Longview, TX 75604		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Longview, TX 75604		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Longview, TX 75604		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Longview, TX 75604		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAGER, Glenda	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Longview, TX 75604		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/252 Rpt: 185/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11218	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/252 Rpt: 186/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saal, James <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11218	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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4 Date 03/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/252 Rpt: 188/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/252 Rpt: 189/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Wilkinson Barker Knauer
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sashkin, Davina <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilkinson Barker Knauer
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenker, Rebecca	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Stephenville, TX 76401		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code Stephenville, TX 76401		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Stephenville, TX 76401		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code Stephenville, TX 76401	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/252 Rpt: 193/260
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4 Date 05/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code Stephenville, TX 76401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipper, PATRICIA <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/252 Rpt: 194/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Poolville, TX 76487		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Poolville, TX 76487		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Poolville, TX 76487		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Poolville, TX 76487		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Poolville, TX 76487		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/252 Rpt: 195/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> 6 Contributor address; City; State; Zip Code Poolville, TX 76487	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeck, Pamela <hr/> Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
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Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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6 Contributor address; City; State; Zip Code Poolville, TX 76487		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Los Angeles, CA 90065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Los Angeles, CA 90065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Los Angeles, CA 90065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Los Angeles, CA 90065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 03/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaman, Natalie <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90065	7 Amount of Contribution (\$) \$12.50
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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
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Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Ashley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired

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4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Pasadena, TX 77503		
8 Principal occupation / Job title (See Instructions) Technical Writer/Editor		9 Employer (See Instructions) Retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$12.50
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Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Janette	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Principal occupation / Job title (See Instructions) Technical Writer/Editor		Employer (See Instructions) Retired
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8 Principal occupation / Job title (See Instructions) Technical Writer/Editor		9 Employer (See Instructions) Retired
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cindy <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$1.50
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8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sides, Rob	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$1.50
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Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self

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6 Contributor address; City; State; Zip Code Brooklyn, NY 11238		
8 Principal occupation / Job title (See Instructions) Filmmaker		9 Employer (See Instructions) Self
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brooklyn, NY 11238		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverbush, Lori	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Brooklyn, NY 11238		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Houston, TX 77008		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Houston, TX 77008		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self

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8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Self
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76164		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76164		
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Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smokoski, Robert Scott	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76164		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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4 Date 01/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/252 Rpt: 211/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$5.00
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Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
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Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Frisco, TX 75035		
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Contributor address; City; State; Zip Code Frisco, TX 75035		
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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Arlington, TX 76017		
8 Principal occupation / Job title (See Instructions) Retired librarian		9 Employer (See Instructions) Retired from FWISD
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Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Tana	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Retired librarian		Employer (See Instructions) Retired from FWISD
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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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Contributor address; City; State; Zip Code Austin, TX 78701		
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SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Manager Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$5.00
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Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Steve <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Manager Application Development		Employer (See Instructions) Reynolds and Reynolds

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SCHEDULE A1

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Principal occupation / Job title (See Instructions) Manager Application Development		Employer (See Instructions) Reynolds and Reynolds
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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6 Contributor address; City; State; Zip Code Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippit, Virginia	Amount of Contribution (\$) \$12.50
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/252 Rpt: 226/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDenberg, Audrey <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Bailey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Housekeeper		Employer (See Instructions) Velasquez Cleaning Service
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Bailey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Housekeeper		Employer (See Instructions) Velasquez Cleaning Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/252 Rpt: 227/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/252 Rpt: 228/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	7 Amount of Contribution (\$) \$3.75
6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine	Amount of Contribution (\$) \$3.75
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/252 Rpt: 229/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidouria, Christine <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/252 Rpt: 230/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/252 Rpt: 231/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vunderink, Gregg <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/252 Rpt: 232/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) human resources		9 Employer (See Instructions) N/A
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/252 Rpt: 233/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) human resources		9 Employer (See Instructions) N/A
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Chris	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) human resources		Employer (See Instructions) N/A
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber O.D. P.C.
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber O.D. P.C.
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Practice Manager		Employer (See Instructions) David E. Weber O.D. P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/252 Rpt: 234/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Angela	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Dallas, TX 75230		
8 Principal occupation / Job title (See Instructions) Practice Manager		9 Employer (See Instructions) David E. Weber O.D. P.C.
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Elizabeth	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Cary, NC 27511		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Elizabeth	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Cary, NC 27511		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Copperas Cove, TX 76522		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Copperas Cove, TX 76522		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/252 Rpt: 235/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/252 Rpt: 236/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/252 Rpt: 237/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Houston, TX 77084		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/252 Rpt: 238/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Houston, TX 77084		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Houston, TX 77084		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Genevieve	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Bay City, TX 77414		
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/252 Rpt: 240/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> 6 Contributor address; City; State; Zip Code Bay City, TX 77414	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Real estate agent		9 Employer (See Instructions) Self
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sherry <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Real estate agent		Employer (See Instructions) Self
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business process outsourcing		Employer (See Instructions) Practice Partners LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/252 Rpt: 241/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rusty <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Business process outsourcing		9 Employer (See Instructions) Practice Partners LLC
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mary <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womach, Karyn <hr/> Contributor address; City; State; Zip Code San Deigo, CA 92115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rgp
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/252 Rpt: 242/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/252 Rpt: 243/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/252 Rpt: 244/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/252 Rpt: 245/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) a caplan, carolyn	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Houston, TX 77025		
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/252 Rpt: 246/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Houston, TX 77025		
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/252 Rpt: 247/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) Educational Consultant		9 Employer (See Instructions) Self
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caplan, carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/252 Rpt: 248/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code austin, TX 78757		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code austin, TX 78757		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/252 Rpt: 249/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> 6 Contributor address; City; State; Zip Code austin, TX 78757	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) field, megan <hr/> Contributor address; City; State; Zip Code austin, TX 78757	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy <hr/> Contributor address; City; State; Zip Code phila, PA 19103	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy <hr/> Contributor address; City; State; Zip Code phila, PA 19103	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/252 Rpt: 250/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy	7 Amount of Contribution (\$) \$0.50
6 Contributor address; City; State; Zip Code phila, PA 19103		
8 Principal occupation / Job title (See Instructions) psychotherapist		9 Employer (See Instructions) self
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code phila, PA 19103		
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code phila, PA 19103		
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) forman, wendy	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code phila, PA 19103		
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol	Amount of Contribution (\$) \$0.50
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/252 Rpt: 251/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/252 Rpt: 252/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunce, carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mcvay, jason <hr/> Contributor address; City; State; Zip Code abilene, TX 79602	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) n/a		Employer (See Instructions) n/a
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mcvay, jason <hr/> Contributor address; City; State; Zip Code abilene, TX 79602	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) n/a		Employer (See Instructions) n/a
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/252 Rpt: 253/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/252 Rpt: 254/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/252 Rpt: 255/260
2 FILER NAME Every State Blue - Texas		3 Filer ID (Ethics Commission Filers) 00087094
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) plummer, robert 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 256/260	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/01/2024	5 Payee name Every State Blue	
6 Amount (\$) \$191.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Every State Blue	
Amount (\$) \$185.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name Every State Blue	
Amount (\$) \$182.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 257/260	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 03/31/2024	5 Payee name Every State Blue	
6 Amount (\$) \$186.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2024	Payee name Every State Blue	
Amount (\$) \$192.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2024	Payee name Every State Blue	
Amount (\$) \$196.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 258/260	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094	
4 Date 06/30/2024	5 Payee name Every State Blue		
6 Amount (\$) \$127.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 237 Florida Ave NW Washington, DC 20001		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 01/26/2024	5 Payee name Amalgamated Bank	
6 Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 02/27/2024	Payee name Amalgamated Bank	
Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 03/27/2024	Payee name Amalgamated Bank	
Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 04/26/2024	Payee name Amalgamated Bank	
Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Every State Blue - Texas	3 Filer ID (Ethics Commission Filers) 00087094
4 Date 05/24/2024	5 Payee name Amalgamated Bank	
6 Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 06/28/2024	Payee name Amalgamated Bank	
Amount (\$) 14.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1825 K St NW Washignton, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 06/04/2024	Payee name Sexton, Janette	
Amount (\$) 16.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1627 Maywood Lane Pasadena, TX 77503	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Refunded Contribution	(b) Description (See instructions regarding type of information required.) Refunded Contribution