

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

| | | | |
|----------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------|
| 1 Filer ID (Ethics Commission Filers) 00082985 | 2 Total pages filed: 257 | OFFICE USE ONLY | |
| 3 COMMITTEE NAME Cambio Texas PAC | | | Date Received ELECTRONICALLY FILED 07/15/2024 |
| 4 TREASURER NAME Naik, Parthkumar (Mr.) | | | Date Hand-delivered or Date Postmarked |
| 5 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | Receipt # |
| | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 10th day after campaign treasurer resignation | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution report | Amount |
| | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Other (specify) _____ | Date Processed |
| 6 ORIGINAL PERIOD COVERED | Month Day Year 01/01/2024 | THROUGH | Month Day Year 06/30/2024 |
| Date Imaged | | | |

7 EXPLANATION OF CORRECTION
Updated to reflect support of State Representative candidate.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Parthkumar Naik

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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) 00082985 | 2 Total pages filed: 257 |
| 3 COMMITTEE NAME Cambio Texas PAC | | 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 135 Paseo Del Prado, STE 62 Edinburg, TX 78539 | | |
| | Date Hand-delivered or Date Postmarked | | |
| | Receipt # | Amount | |
| | Date Processed | | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mr. Parthkumar | | |
| | NICKNAME LAST SUFFIX Naik | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado, STE 62 Edinburg, TX 78539 | | |
| | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4108 Nightshade Ave. McAllen, TX 78504 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | | |
| | AREA CODE PHONE NUMBER EXTENSION (956) 330-7552 | | |
| 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 | | |
| | ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" 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 Cambio Texas PAC | 13 Filer ID (Ethics Commission Filers) 00082985 |
|----------------------------------------------|-----------------------------------------------------------|

| | | |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------|
| 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 Jonathan Gracia State Representative |
| | | 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) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 41,075.15 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 29,246.57 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 15,383.19 |
| 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.

Mr. Parthkumar Naik

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 4 of 257

| | | |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| 12 COMMITTEE NAME Cambio Texas PAC | | 13 Filer ID (Ethics Commission Filers) 00082985 |
| 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 Venable Desiree State Representative |
| | | 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.) | |
| | | |

SUBTOTALS - GPAC

| | |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| 17 COMMITTEE NAME Cambio Texas PAC | 18 Filer ID (Ethics Commission Filers) 00082985 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 41,075.15 |
| 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 | \$ 29,246.57 |
| 11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/219 Rpt: 6/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33172 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | 9 Employer (See Instructions) Canival Cruises |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph <hr/> Contributor address; City; State; Zip Code Miami, FL 33172 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Canival Cruises |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph <hr/> Contributor address; City; State; Zip Code Miami, FL 33172 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Author | | Employer (See Instructions) Canival Cruises |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph <hr/> Contributor address; City; State; Zip Code Miami, FL 33172 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | Employer (See Instructions) Canival Cruises |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph <hr/> Contributor address; City; State; Zip Code Miami, FL 33172 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | Employer (See Instructions) Canival Cruises |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/219 Rpt: 7/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Bernal, Joseph | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code Miami, FL 33172 | | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Canival Cruises |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| Principal occupation / Job title (See Instructions) Proposal Manager | | Employer (See Instructions) Cvent |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Cvent |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) Cvent |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) Cvent |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/219 Rpt: 8/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| 8 Principal occupation / Job title (See Instructions) researcher | | 9 Employer (See Instructions) Cvent |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Kara | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Tulsa, OK 74105 | | |
| Principal occupation / Job title (See Instructions) Rn | | Employer (See Instructions) Cvent |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Davis, CA 95618 | | |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) Not Employed |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Davis, CA 95618 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Davis, CA 95618 | | |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/219 Rpt: 9/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David <hr/> 6 Contributor address; City; State; Zip Code Davis, CA 95618 | 7 Amount of Contribution (\$) \$12.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David <hr/> Contributor address; City; State; Zip Code Davis, CA 95618 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allegoren, David <hr/> Contributor address; City; State; Zip Code Davis, CA 95618 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) University of Massachusetts |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Courier | | Employer (See Instructions) University of Massachusetts |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/219 Rpt: 10/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> 6 Contributor address; City; State; Zip Code Milton, MA 02186 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) ARNP | | 9 Employer (See Instructions) University of Massachusetts |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) University of Massachusetts |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Pastor | | Employer (See Instructions) University of Massachusetts |
| Date 03/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Mkt Rep | | Employer (See Instructions) University of Massachusetts |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> Contributor address; City; State; Zip Code Milton, MA 02186 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) University of Massachusetts |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/219 Rpt: 11/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaral, Caitlin <hr/> 6 Contributor address; City; State; Zip Code Milton, MA 02186 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Doctor | | 9 Employer (See Instructions) University of Massachusetts |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Cigna |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Cigna |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Cigna |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Cigna |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/219 Rpt: 12/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> 6 Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | 7 Amount of Contribution (\$) \$1.43 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Cigna |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ananson, Stasia <hr/> Contributor address; City; State; Zip Code Bridgewater, NJ 08807 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Cigna |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Assistant Editor | | Employer (See Instructions) Not Employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Assistant Editor | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/219 Rpt: 13/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not employed |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Not Employed |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) Not employed |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Assistant Editor | | Employer (See Instructions) Not Employed |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Not employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/219 Rpt: 14/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric | 7 Amount of Contribution (\$) \$2.78 |
| 6 Contributor address; City; State; Zip Code Seattle, WA 98103 | | |
| 8 Principal occupation / Job title (See Instructions) Project Manager | | 9 Employer (See Instructions) Not Employed |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Seattle, WA 98103 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not employed |
| Date 06/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Seattle, WA 98103 | | |
| Principal occupation / Job title (See Instructions) Pharmacist | | Employer (See Instructions) Not Employed |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Eric | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Seattle, WA 98103 | | |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) Not employed |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna | Amount of Contribution (\$) \$3.88 |
| Contributor address; City; State; Zip Code San Francisco, CA 94104 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Tarlson & Associates |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/219 Rpt: 15/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94104 | 7 Amount of Contribution (\$) \$3.88 |
| 8 Principal occupation / Job title (See Instructions) Proposal Manager | | 9 Employer (See Instructions) Tarlson & Associates |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94104 | Amount of Contribution (\$) \$3.88 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Tarlson & Associates |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94104 | Amount of Contribution (\$) \$3.88 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Tarlson & Associates |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94104 | Amount of Contribution (\$) \$3.88 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Tarlson & Associates |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnzen, Mauna <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94104 | Amount of Contribution (\$) \$3.88 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Tarlson & Associates |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/219 Rpt: 16/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | 7 Amount of Contribution (\$) \$2.78 |
| 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| 8 Principal occupation / Job title (See Instructions) Project Manager | | 9 Employer (See Instructions) Spotify |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Spotify |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Spotify |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Spotify |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Spotify |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/219 Rpt: 17/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballantine, Alistair | 7 Amount of Contribution (\$) \$2.78 |
| 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201 | | |
| 8 Principal occupation / Job title (See Instructions) Author | | 9 Employer (See Instructions) Spotify |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric | Amount of Contribution (\$) \$3.75 |
| Contributor address; City; State; Zip Code livingstgon, NJ 07039 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Federal Govt |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric | Amount of Contribution (\$) \$3.75 |
| Contributor address; City; State; Zip Code livingstgon, NJ 07039 | | |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Federal Govt |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric | Amount of Contribution (\$) \$3.75 |
| Contributor address; City; State; Zip Code livingstgon, NJ 07039 | | |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) Federal Govt |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric | Amount of Contribution (\$) \$3.75 |
| Contributor address; City; State; Zip Code livingstgon, NJ 07039 | | |
| Principal occupation / Job title (See Instructions) Administrative Asst. | | Employer (See Instructions) Federal Govt |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/219 Rpt: 18/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltuch, Eric <hr/> 6 Contributor address; City; State; Zip Code livingstgon, NJ 07039 | 7 Amount of Contribution (\$) \$3.75 |
| 8 Principal occupation / Job title (See Instructions) Administrative Asst. | | 9 Employer (See Instructions) Federal Govt |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$5.04 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Self |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$5.04 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Self |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$5.04 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Self |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$5.04 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/219 Rpt: 19/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757 | 7 Amount of Contribution (\$) \$5.04 |
| 8 Principal occupation / Job title (See Instructions) Project Manager | | 9 Employer (See Instructions) Self |
| Date 06/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$5.04 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Self |
| Date 01/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Chemist | | Employer (See Instructions) Christ's Church of the Valley |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Christ's Church of the Valley |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Chemist | | Employer (See Instructions) Christ's Church of the Valley |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/219 Rpt: 20/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> 6 Contributor address; City; State; Zip Code Phoenix, AZ 85037 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Chemist | | 9 Employer (See Instructions) Christ's Church of the Valley |
| Date 05/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Christ's Church of the Valley |
| Date 06/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugus, Justin <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85037 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Christ's Church of the Valley |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayens, Carol <hr/> Contributor address; City; State; Zip Code Houston, TX 77055 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Not Employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Christopher <hr/> Contributor address; City; State; Zip Code Portland, OR 97215 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Providence Health and Services |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/219 Rpt: 21/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Christopher <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97215 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Client Services Specialist | | 9 Employer (See Instructions) Providence Health and Services |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Researcher | | Employer (See Instructions) Illinois Public Health Institute |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Illinois Public Health Institute |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) RN | | Employer (See Instructions) Illinois Public Health Institute |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) Illinois Public Health Institute |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/219 Rpt: 22/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60610 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) RN | | 9 Employer (See Instructions) Illinois Public Health Institute |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) Illinois Public Health Institute |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Your Part-Time Controller |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Your Part-Time Controller |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Your Part-Time Controller |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/219 Rpt: 23/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> 6 Contributor address; City; State; Zip Code Abington, MA 02351 | 7 Amount of Contribution (\$) \$2.78 |
| 8 Principal occupation / Job title (See Instructions) Program Manager | | 9 Employer (See Instructions) Your Part-Time Controller |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Your Part-Time Controller |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Heather <hr/> Contributor address; City; State; Zip Code Abington, MA 02351 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Your Part-Time Controller |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Farmers Business Network |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Farmers Business Network |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/219 Rpt: 24/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David | 7 Amount of Contribution (\$) \$1.25 |
| 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Farmers Business Network |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Farmers Business Network |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Mechanical Engineer | | Employer (See Instructions) Farmers Business Network |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitenbuecher, David | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) Farmers Business Network |
| Date 03/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronstein, Dale | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Fort Worth, TX 76112 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) KNOWS Imports |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/219 Rpt: 25/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code White Settlement, TX 76108 | | |
| 8 Principal occupation / Job title (See Instructions) Graduate Student | | 9 Employer (See Instructions) Ryder |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code White Settlement, TX 76108 | | |
| Principal occupation / Job title (See Instructions) Biz+dev | | Employer (See Instructions) Ryder |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code White Settlement, TX 76108 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Ryder |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code White Settlement, TX 76108 | | |
| Principal occupation / Job title (See Instructions) Puppeteer | | Employer (See Instructions) Ryder |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code White Settlement, TX 76108 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Ryder |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/219 Rpt: 26/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brubaker, Kenneth <hr/> 6 Contributor address; City; State; Zip Code White Settlement, TX 76108 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Software developer | | 9 Employer (See Instructions) Ryder |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdick, William <hr/> Contributor address; City; State; Zip Code Savannah, GA 31411 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Administrative Asst. | | Employer (See Instructions) Workday |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Data Scientist | | Employer (See Instructions) Not Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) computer consultant | | Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/219 Rpt: 27/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances | 7 Amount of Contribution (\$) \$1.88 |
| 6 Contributor address; City; State; Zip Code berkeley, CA 94707 | | |
| 8 Principal occupation / Job title (See Instructions) Mechanical Engineer | | 9 Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances | Amount of Contribution (\$) \$1.88 |
| Contributor address; City; State; Zip Code berkeley, CA 94707 | | |
| Principal occupation / Job title (See Instructions) Software developer | | Employer (See Instructions) Not Employed |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Frances | Amount of Contribution (\$) \$1.88 |
| Contributor address; City; State; Zip Code berkeley, CA 94707 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Not Employed |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| Principal occupation / Job title (See Instructions) ARNP | | Employer (See Instructions) Bass Berry & Sims |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Bass Berry & Sims |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 23/219 Rpt: 28/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| 8 Principal occupation / Job title (See Instructions) Se | | 9 Employer (See Instructions) Bass Berry & Sims |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| Principal occupation / Job title (See Instructions) Winemaker | | Employer (See Instructions) Bass Berry & Sims |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Bass Berry & Sims |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Nashville, TN 37206 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Bass Berry & Sims |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Valve |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 24/219 Rpt: 29/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | 7 Amount of Contribution (\$) \$3.12 |
| 6 Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| 8 Principal occupation / Job title (See Instructions) Administrative Asst. | | 9 Employer (See Instructions) Valve |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) Valve |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Valve |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Valve |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butlin, Augusta | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Seattle, WA 98105 | | |
| Principal occupation / Job title (See Instructions) Financial advisor | | Employer (See Instructions) Valve |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 25/219 Rpt: 30/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> 6 Contributor address; City; State; Zip Code Woodinville, WA 98072 | 7 Amount of Contribution (\$) \$2.22 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Manson Construction Co. |
| Date 02/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072 | Amount of Contribution (\$) \$2.22 |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) Manson Construction Co. |
| Date 03/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072 | Amount of Contribution (\$) \$2.22 |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) Manson Construction Co. |
| Date 04/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072 | Amount of Contribution (\$) \$2.22 |
| Principal occupation / Job title (See Instructions) Senior Sales Engineer | | Employer (See Instructions) Manson Construction Co. |
| Date 05/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072 | Amount of Contribution (\$) \$2.22 |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) Manson Construction Co. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 26/219 Rpt: 31/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Connor <hr/> 6 Contributor address; City; State; Zip Code Woodinville, WA 98072 | 7 Amount of Contribution (\$) \$2.22 |
| 8 Principal occupation / Job title (See Instructions) Nurse | | 9 Employer (See Instructions) Manson Construction Co. |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Se | | Employer (See Instructions) United Nations |
| Date 02/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) United Nations |
| Date 03/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) United Nations |
| Date 04/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) United Nations |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 27/219 Rpt: 32/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia | 7 Amount of Contribution (\$) \$1.00 |
| | 6 Contributor address; City; State; Zip Code Pleasanton, CA 94566 | |
| 8 Principal occupation / Job title (See Instructions) Financial Analyst | | 9 Employer (See Instructions) United Nations |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Burns, Delia | Amount of Contribution (\$) \$1.00 |
| | Contributor address; City; State; Zip Code Pleasanton, CA 94566 | |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) United Nations |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam | Amount of Contribution (\$) \$3.12 |
| | Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | |
| Principal occupation / Job title (See Instructions) Financial advisor | | Employer (See Instructions) Franchise Tax Board |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam | Amount of Contribution (\$) \$3.12 |
| | Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Franchise Tax Board |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam | Amount of Contribution (\$) \$3.12 |
| | Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) Franchise Tax Board |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 28/219 Rpt: 33/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> 6 Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Franchise Tax Board |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Franchise Tax Board |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cederblom, Adam <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Franchise Tax Board |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) JCFS |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Programmer | | Employer (See Instructions) JCFS |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 29/219 Rpt: 34/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> 6 Contributor address; City; State; Zip Code Deerfield, IL 60015 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) professor | | 9 Employer (See Instructions) JCFS |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) JCFS |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) JCFS |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) JCFS |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase Jr, Theodore <hr/> Contributor address; City; State; Zip Code Princeton, NJ 08540 | Amount of Contribution (\$) \$42.00 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 30/219 Rpt: 35/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/09/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase Jr, Theodore | 7 Amount of Contribution (\$) \$39.00 |
| | 6 Contributor address; City; State; Zip Code Princeton, NJ 08540 | |
| 8 Principal occupation / Job title (See Instructions) Senior Sales Engineer | | 9 Employer (See Instructions) Not Employed |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christenson, Marissa | Amount of Contribution (\$) \$3.12 |
| | Contributor address; City; State; Zip Code Holladay, UT 84124 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Kailin | Amount of Contribution (\$) \$2.00 |
| | Contributor address; City; State; Zip Code Seattle, WA 98102-5144 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Amazon |
| Date 06/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clean and Prosperous America | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Mercer Island, WA 98040 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca | Amount of Contribution (\$) \$1.25 |
| | Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Department of Veterans Affairs |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 31/219 Rpt: 36/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) School Age Literacy Specialist | | 9 Employer (See Instructions) Department of Veterans Affairs |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Department of Veterans Affairs |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) Department of Veterans Affairs |
| Date 05/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Department of Veterans Affairs |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clive, Rebecca <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | Employer (See Instructions) Department of Veterans Affairs |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 32/219 Rpt: 37/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collica, Sarah | 7 Amount of Contribution (\$) \$1.25 |
| 6 Contributor address; City; State; Zip Code Northridge, CA 91343 | | |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) shalom institute |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Urban Machine |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Urban Machine |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| Principal occupation / Job title (See Instructions) Ad tech | | Employer (See Instructions) Urban Machine |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Urban Machine |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 33/219 Rpt: 38/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | 7 Amount of Contribution (\$) \$3.12 |
| 6 Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Urban Machine |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Tyler | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Oakland, CA 94618 | | |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) Urban Machine |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code Austin, TX 78746 | | |
| Principal occupation / Job title (See Instructions) Grad Student | | Employer (See Instructions) Self |
| Date 03/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Austin, TX 78746 | | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Self |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code Austin, TX 78746 | | |
| Principal occupation / Job title (See Instructions) AP Clerk | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 34/219 Rpt: 39/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Self |
| Date 06/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Self |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code Columbus, OH 43215 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Fusion Alliance |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code Columbus, OH 43215 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Fusion Alliance |
| Date 03/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam <hr/> Contributor address; City; State; Zip Code Columbus, OH 43215 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Fusion Alliance |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 35/219 Rpt: 40/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam | 7 Amount of Contribution (\$) \$3.13 |
| 6 Contributor address; City; State; Zip Code Columbus, OH 43215 | | |
| 8 Principal occupation / Job title (See Instructions) Volunteer Director | | 9 Employer (See Instructions) Fusion Alliance |
| Date 05/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Columbus, OH 43215 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Fusion Alliance |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Adam | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Columbus, OH 43215 | | |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) Fusion Alliance |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Carol | Amount of Contribution (\$) \$15.00 |
| Contributor address; City; State; Zip Code PLANO, TX 75023 | | |
| Principal occupation / Job title (See Instructions) Director PV Systems | | Employer (See Instructions) not employed |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| Principal occupation / Job title (See Instructions) administrative | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 36/219 Rpt: 41/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| 8 Principal occupation / Job title (See Instructions) professor | | 9 Employer (See Instructions) Not Employed |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| Principal occupation / Job title (See Instructions) ARNP | | Employer (See Instructions) Not Employed |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 | | |
| Principal occupation / Job title (See Instructions) Winemaker | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 37/219 Rpt: 42/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | 7 Amount of Contribution (\$) \$12.50 |
| | 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | |
| 8 Principal occupation / Job title (See Instructions) Compliance Manager | | 9 Employer (See Instructions) Northrop Grumman |
| Date 02/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | Amount of Contribution (\$) \$12.50 |
| | Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | |
| Principal occupation / Job title (See Instructions) Operational Strategy | | Employer (See Instructions) Northrop Grumman |
| Date 03/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | Amount of Contribution (\$) \$12.50 |
| | Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Northrop Grumman |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | Amount of Contribution (\$) \$12.50 |
| | Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | |
| Principal occupation / Job title (See Instructions) Operational Strategy | | Employer (See Instructions) Northrop Grumman |
| Date 05/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | Amount of Contribution (\$) \$12.50 |
| | Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Northrop Grumman |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 38/219 Rpt: 43/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Greg | 7 Amount of Contribution (\$) \$12.50 |
| 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278 | | |
| 8 Principal occupation / Job title (See Instructions) Operational Strategy | | 9 Employer (See Instructions) Northrop Grumman |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Woodlawn, TN 37191 | | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) University of Cape Town South Africa |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Woodlawn, TN 37191 | | |
| Principal occupation / Job title (See Instructions) Therapist | | Employer (See Instructions) University of Cape Town South Africa |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Woodlawn, TN 37191 | | |
| Principal occupation / Job title (See Instructions) Principal Software Application Engineer | | Employer (See Instructions) University of Cape Town South Africa |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Woodlawn, TN 37191 | | |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) University of Cape Town South Africa |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 39/219 Rpt: 44/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> 6 Contributor address; City; State; Zip Code Woodlawn, TN 37191 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Civil servant | | 9 Employer (See Instructions) University of Cape Town South Africa |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Material Handler | | Employer (See Instructions) University of Cape Town South Africa |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) University of Cape Town South Africa |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) University of Cape Town South Africa |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, losac <hr/> Contributor address; City; State; Zip Code Woodlawn, TN 37191 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) University of Cape Town South Africa |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 40/219 Rpt: 45/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> 6 Contributor address; City; State; Zip Code Dayville, CT 06241 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Lead Scientist | | 9 Employer (See Instructions) Not Employed |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> Contributor address; City; State; Zip Code Dayville, CT 06241 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Lead Scientist | | Employer (See Instructions) Not Employed |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> Contributor address; City; State; Zip Code Dayville, CT 06241 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Lead Scientist | | Employer (See Instructions) Not Employed |
| Date 04/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> Contributor address; City; State; Zip Code Dayville, CT 06241 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Lead Scientist | | Employer (See Instructions) Not Employed |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> Contributor address; City; State; Zip Code Dayville, CT 06241 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 41/219 Rpt: 46/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delaney, Caroline <hr/> 6 Contributor address; City; State; Zip Code Dayville, CT 06241 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Learning Project Manager | | 9 Employer (See Instructions) Not Employed |
| Date 01/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10150 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Ad tech | | Employer (See Instructions) Not Employed |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10150 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Public Health Nutrition | | Employer (See Instructions) Not Employed |
| Date 03/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10150 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Volunteer Director | | Employer (See Instructions) Not Employed |
| Date 04/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10150 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 42/219 Rpt: 47/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert | 7 Amount of Contribution (\$) \$2.50 |
| 6 Contributor address; City; State; Zip Code New York, NY 10150 | | |
| 8 Principal occupation / Job title (See Instructions) Ad tech | | 9 Employer (See Instructions) Not Employed |
| Date 06/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingo, Robert | Amount of Contribution (\$) \$2.50 |
| Contributor address; City; State; Zip Code New York, NY 10150 | | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Not Employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Walnut, CA 91789 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) SCPMG |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Walnut, CA 91789 | | |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) SCPMG |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Walnut, CA 91789 | | |
| Principal occupation / Job title (See Instructions) Advertising | | Employer (See Instructions) SCPMG |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 43/219 Rpt: 48/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> 6 Contributor address; City; State; Zip Code Walnut, CA 91789 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Advertising | | 9 Employer (See Instructions) SCPMG |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> Contributor address; City; State; Zip Code Walnut, CA 91789 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) SCPMG |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donath, Jeff <hr/> Contributor address; City; State; Zip Code Walnut, CA 91789 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) SCPMG |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Santa Clara County |
| Date 02/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Santa Clara County |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 44/219 Rpt: 49/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95129 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Santa Clara County |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Santa Clara County |
| Date 05/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Santa Clara County |
| Date 06/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Zachary <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Santa Clara County |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) not employed | | Employer (See Instructions) Genuine Interactive |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 45/219 Rpt: 50/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> 6 Contributor address; City; State; Zip Code Billerica, MA 01821 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Therapist | | 9 Employer (See Instructions) Genuine Interactive |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) computer consultant | | Employer (See Instructions) Genuine Interactive |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Genuine Interactive |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) Genuine Interactive |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, Timothy <hr/> Contributor address; City; State; Zip Code Billerica, MA 01821 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Genuine Interactive |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 46/219 Rpt: 51/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom <hr/> 6 Contributor address; City; State; Zip Code Hollywood, FL 33019 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Mercury Ins |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Mercury Ins |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Mercury Ins |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Mercury Ins |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Mercury Ins |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 47/219 Rpt: 52/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Tom | 7 Amount of Contribution (\$) \$2.00 |
| 6 Contributor address; City; State; Zip Code Hollywood, FL 33019 | | |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Mercury Ins |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew | Amount of Contribution (\$) \$2.08 |
| Contributor address; City; State; Zip Code Boise, ID 83702 | | |
| Principal occupation / Job title (See Instructions) Advertising | | Employer (See Instructions) Ada County Highway District |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew | Amount of Contribution (\$) \$2.08 |
| Contributor address; City; State; Zip Code Boise, ID 83702 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Ada County Highway District |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew | Amount of Contribution (\$) \$2.08 |
| Contributor address; City; State; Zip Code Boise, ID 83702 | | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Ada County Highway District |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew | Amount of Contribution (\$) \$2.08 |
| Contributor address; City; State; Zip Code Boise, ID 83702 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Ada County Highway District |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 48/219 Rpt: 53/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew <hr/> 6 Contributor address; City; State; Zip Code Boise, ID 83702 | 7 Amount of Contribution (\$) \$2.08 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Ada County Highway District |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmond, Matthew <hr/> Contributor address; City; State; Zip Code Boise, ID 83702 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Ada County Highway District |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> Contributor address; City; State; Zip Code South Freeport, ME 04078 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Self |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> Contributor address; City; State; Zip Code South Freeport, ME 04078 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) not employed | | Employer (See Instructions) Self |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon <hr/> Contributor address; City; State; Zip Code South Freeport, ME 04078 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 49/219 Rpt: 54/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon | 7 Amount of Contribution (\$) \$12.50 |
| 6 Contributor address; City; State; Zip Code South Freeport, ME 04078 | | |
| 8 Principal occupation / Job title (See Instructions) Software QA Manager | | 9 Employer (See Instructions) Self |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code South Freeport, ME 04078 | | |
| Principal occupation / Job title (See Instructions) Biz+dev | | Employer (See Instructions) Self |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jon | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code South Freeport, ME 04078 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self |
| Date 01/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Plano, TX 75093 | | |
| Principal occupation / Job title (See Instructions) Aerospace manager | | Employer (See Instructions) Keurig Dr Pepper |
| Date 02/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Plano, TX 75093 | | |
| Principal occupation / Job title (See Instructions) Compliance Manager | | Employer (See Instructions) Keurig Dr Pepper |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 50/219 Rpt: 55/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Plano, TX 75093 | |
| 8 Principal occupation / Job title (See Instructions) Compliance Manager | | 9 Employer (See Instructions) Keurig Dr Pepper |
| Date 04/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Plano, TX 75093 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Keurig Dr Pepper |
| Date 05/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Plano, TX 75093 | |
| Principal occupation / Job title (See Instructions) Operational Strategy | | Employer (See Instructions) Keurig Dr Pepper |
| Date 06/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endo, Katy | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Plano, TX 75093 | |
| Principal occupation / Job title (See Instructions) researcher | | Employer (See Instructions) Keurig Dr Pepper |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Haines City, FL 33844 | |
| Principal occupation / Job title (See Instructions) Computer programmer | | Employer (See Instructions) PCSB |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 51/219 Rpt: 56/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code Haines City, FL 33844 | | |
| 8 Principal occupation / Job title (See Instructions) Self | | 9 Employer (See Instructions) PCSB |
| Date 05/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, MaryBeth | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Haines City, FL 33844 | | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) PCSB |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Not Employed |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Not Employed |
| Date 03/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 52/219 Rpt: 57/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| 8 Principal occupation / Job title (See Instructions) Realtor | | 9 Employer (See Instructions) Not Employed |
| Date 05/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Not Employed |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Rose Marie | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Indialantic, FL 32903 | | |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Not Employed |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Los Angeles, CA 90034 | | |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) UCLA |
| Date 02/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code Los Angeles, CA 90034 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) UCLA |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 53/219 Rpt: 58/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90034 | 7 Amount of Contribution (\$) \$2.78 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) UCLA |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) UCLA |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) 12A | | Employer (See Instructions) UCLA |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erskine, Laura <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) UCLA |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) UMass Chan Medical School |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 54/219 Rpt: 59/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> 6 Contributor address; City; State; Zip Code Wellesley, MA 02481 | 7 Amount of Contribution (\$) \$1.88 |
| 8 Principal occupation / Job title (See Instructions) System Analyst | | 9 Employer (See Instructions) UMass Chan Medical School |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) UMass Chan Medical School |
| Date 04/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) System Analyst | | Employer (See Instructions) UMass Chan Medical School |
| Date 05/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Director PV Systems | | Employer (See Instructions) UMass Chan Medical School |
| Date 06/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faust, Travis <hr/> Contributor address; City; State; Zip Code Wellesley, MA 02481 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) UMass Chan Medical School |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 55/219 Rpt: 60/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> 6 Contributor address; City; State; Zip Code North Kingstown, RI 02852 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Navatek Ltd |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Navatek Ltd |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Navatek Ltd |
| Date 04/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Navatek Ltd |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Navatek Ltd |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 56/219 Rpt: 61/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Neal <hr/> 6 Contributor address; City; State; Zip Code North Kingstown, RI 02852 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Navatek Ltd |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Varian Medical Systems |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Varian Medical Systems |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Varian Medical Systems |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Varian Medical Systems |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 57/219 Rpt: 62/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> 6 Contributor address; City; State; Zip Code Los Gatos, CA 95032 | 7 Amount of Contribution (\$) \$3.58 |
| 8 Principal occupation / Job title (See Instructions) Professor | | 9 Employer (See Instructions) Varian Medical Systems |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracey <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95032 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Proposal Manager | | Employer (See Instructions) Varian Medical Systems |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) CSL Behring |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Software QA Manager | | Employer (See Instructions) CSL Behring |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Financial advisor | | Employer (See Instructions) CSL Behring |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 58/219 Rpt: 63/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> 6 Contributor address; City; State; Zip Code Penn Valley, PA 19072 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Data Scientist | | 9 Employer (See Instructions) CSL Behring |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) CSL Behring |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Ryan <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) CSL Behring |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115 | Amount of Contribution (\$) \$8.34 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115 | Amount of Contribution (\$) \$8.34 |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 59/219 Rpt: 64/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98115 | 7 Amount of Contribution (\$) \$8.34 |
| 8 Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | 9 Employer (See Instructions) Not Employed |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115 | Amount of Contribution (\$) \$8.34 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Not Employed |
| Date 05/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115 | Amount of Contribution (\$) \$8.34 |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Not Employed |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Jim <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115 | Amount of Contribution (\$) \$8.34 |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Not Employed |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Department of Veterans Affairs |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 60/219 Rpt: 65/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32608 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Scientist | | 9 Employer (See Instructions) Department of Veterans Affairs |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Department of Veterans Affairs |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Department of Veterans Affairs |
| Date 05/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Department of Veterans Affairs |
| Date 06/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franck, Hugh <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32608 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Department of Veterans Affairs |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 61/219 Rpt: 66/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92130 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) L/O Robert L. Friedenberg |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) L/O Robert L. Friedenberg |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) L/O Robert L. Friedenberg |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) L/O Robert L. Friedenberg |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) computer consultant | | Employer (See Instructions) L/O Robert L. Friedenberg |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 62/219 Rpt: 67/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedenberg, Robert <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92130 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) computer consultant | | 9 Employer (See Instructions) L/O Robert L. Friedenber |
| Date 01/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | Amount of Contribution (\$) \$14.29 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Integris Medical Group |
| Date 02/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | Amount of Contribution (\$) \$14.29 |
| Principal occupation / Job title (See Instructions) Phd Student | | Employer (See Instructions) Integris Medical Group |
| Date 03/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | Amount of Contribution (\$) \$14.29 |
| Principal occupation / Job title (See Instructions) Phd Student | | Employer (See Instructions) Integris Medical Group |
| Date 04/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | Amount of Contribution (\$) \$14.29 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Integris Medical Group |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 63/219 Rpt: 68/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> 6 Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | 7 Amount of Contribution (\$) \$14.29 |
| 8 Principal occupation / Job title (See Instructions) Phd Student | | 9 Employer (See Instructions) Integris Medical Group |
| Date 06/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garton, Theresa <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73131 | Amount of Contribution (\$) \$14.29 |
| Principal occupation / Job title (See Instructions) Phd Student | | Employer (See Instructions) Integris Medical Group |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Capital City Village |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) RN | | Employer (See Instructions) Capital City Village |
| Date 03/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Capital City Village |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 64/219 Rpt: 69/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78382 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Public Health Nutrition | | 9 Employer (See Instructions) Capital City Village |
| Date 05/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Capital City Village |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilson, Bonnie <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Capital City Village |
| Date 01/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) ISpot.tv |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) ISpot.tv |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 65/219 Rpt: 70/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara | 7 Amount of Contribution (\$) \$6.25 |
| | 6 Contributor address; City; State; Zip Code Vashon, WA 98070 | |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) ISpot.tv |
| Date 04/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara | Amount of Contribution (\$) \$6.25 |
| | Contributor address; City; State; Zip Code Vashon, WA 98070 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) ISpot.tv |
| Date 05/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Sara | Amount of Contribution (\$) \$6.25 |
| | Contributor address; City; State; Zip Code Vashon, WA 98070 | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) ISpot.tv |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan | Amount of Contribution (\$) \$3.13 |
| | Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not Employed |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan | Amount of Contribution (\$) \$3.13 |
| | Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 66/219 Rpt: 71/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> 6 Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Se | | Employer (See Instructions) Not Employed |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassman, Susan <hr/> Contributor address; City; State; Zip Code CHESTNUT RIDGE, NY 10977-6307 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not Employed |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 67/219 Rpt: 72/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 03/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Wine Merchant | | Employer (See Instructions) Not Employed |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) EGUSD |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) EGUSD |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) EGUSD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 68/219 Rpt: 73/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> 6 Contributor address; City; State; Zip Code Elk Grove, CA 95624 | 7 Amount of Contribution (\$) \$1.43 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) EGUSD |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Psychotherapist | | Employer (See Instructions) EGUSD |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Zach <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95624 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) EGUSD |
| Date 01/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code Allston, MA 02134 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) ActBlue |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code Allston, MA 02134 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) ActBlue |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 69/219 Rpt: 74/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> 6 Contributor address; City; State; Zip Code Allston, MA 02134 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) researcher | | 9 Employer (See Instructions) ActBlue |
| Date 04/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code Allston, MA 02134 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) ActBlue |
| Date 05/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code Allston, MA 02134 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) ActBlue |
| Date 06/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Ellie <hr/> Contributor address; City; State; Zip Code Allston, MA 02134 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) ActBlue |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) JHU APL |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 70/219 Rpt: 75/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> 6 Contributor address; City; State; Zip Code Fulton, MD 20759 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) JHU APL |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Puppeteer | | Employer (See Instructions) JHU APL |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Programmer | | Employer (See Instructions) JHU APL |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) JHU APL |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Philip <hr/> Contributor address; City; State; Zip Code Fulton, MD 20759 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Administrative Asst. | | Employer (See Instructions) JHU APL |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 71/219 Rpt: 76/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> 6 Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) 12A | | 9 Employer (See Instructions) Wallenpaupack Brewing Co |
| Date 02/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Author | | Employer (See Instructions) Wallenpaupack Brewing Co |
| Date 03/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) Wallenpaupack Brewing Co |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) Wallenpaupack Brewing Co |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Wallenpaupack Brewing Co |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 72/219 Rpt: 77/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gratter, Anthony <hr/> 6 Contributor address; City; State; Zip Code Wilkes-Barre, PA 18705 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Wallenpaupack Brewing Co |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Bertha <hr/> Contributor address; City; State; Zip Code Austin, TX 78738 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Not Employed |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) Self |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) Self |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 73/219 Rpt: 78/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Seattle, WA 98102 | | |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Self |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Seattle, WA 98102 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurwell, Katherine | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Seattle, WA 98102 | | |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) Self |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Thornton, CO 80241 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Medtronic |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Thornton, CO 80241 | | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Medtronic |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 74/219 Rpt: 79/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> 6 Contributor address; City; State; Zip Code Thornton, CO 80241 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Medtronic |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Medtronic |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Medtronic |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haisfield, Misty <hr/> Contributor address; City; State; Zip Code Thornton, CO 80241 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Medtronic |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Civil servant | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 75/219 Rpt: 80/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> 6 Contributor address; City; State; Zip Code Issaquah, WA 98029 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Puppeteer | | 9 Employer (See Instructions) Self |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Software QA Manager | | Employer (See Instructions) Self |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) Self |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Programmer | | Employer (See Instructions) Self |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, George <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Material Handler | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 76/219 Rpt: 81/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> 6 Contributor address; City; State; Zip Code Chico, CA 95926 | 7 Amount of Contribution (\$) \$7.14 |
| 8 Principal occupation / Job title (See Instructions) Analyst | | 9 Employer (See Instructions) Not Employed |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926 | Amount of Contribution (\$) \$7.14 |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) Not Employed |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926 | Amount of Contribution (\$) \$7.14 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Not Employed |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926 | Amount of Contribution (\$) \$7.14 |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) Not Employed |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> Contributor address; City; State; Zip Code Chico, CA 95926 | Amount of Contribution (\$) \$7.14 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 77/219 Rpt: 82/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Judy <hr/> 6 Contributor address; City; State; Zip Code Chico, CA 95926 | 7 Amount of Contribution (\$) \$7.14 |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Not Employed |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code San Diego, CA 92102 | Amount of Contribution (\$) \$4.55 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Foresight Sports |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code San Diego, CA 92102 | Amount of Contribution (\$) \$4.55 |
| Principal occupation / Job title (See Instructions) Pharmacist | | Employer (See Instructions) Foresight Sports |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code San Diego, CA 92102 | Amount of Contribution (\$) \$4.55 |
| Principal occupation / Job title (See Instructions) Pharmacist | | Employer (See Instructions) Foresight Sports |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code San Diego, CA 92102 | Amount of Contribution (\$) \$4.55 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Foresight Sports |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 78/219 Rpt: 83/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92102 | 7 Amount of Contribution (\$) \$4.55 |
| 8 Principal occupation / Job title (See Instructions) Scientist | | 9 Employer (See Instructions) Foresight Sports |
| Date 06/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Joseph <hr/> Contributor address; City; State; Zip Code San Diego, CA 92102 | Amount of Contribution (\$) \$4.55 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Foresight Sports |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Puppeteer | | Employer (See Instructions) DB&T |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) DB&T |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly <hr/> Contributor address; City; State; Zip Code Dubuque, IA 52001 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) DB&T |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 79/219 Rpt: 84/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly | 7 Amount of Contribution (\$) \$3.12 |
| 6 Contributor address; City; State; Zip Code Dubuque, IA 52001 | | |
| 8 Principal occupation / Job title (See Instructions) Research | | 9 Employer (See Instructions) DB&T |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Dubuque, IA 52001 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) DB&T |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Polly | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Dubuque, IA 52001 | | |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) DB&T |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 80/219 Rpt: 85/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) Self |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) Self |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverkamp, Rita M | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code El Cajon, CA 92020 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 01/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healthy Gulf | Amount of Contribution (\$) \$20,000.00 |
| Contributor address; City; State; Zip Code New Orleans, LA 70112 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 81/219 Rpt: 86/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | 7 Amount of Contribution (\$) \$5.72 |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Ultragenyx |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$5.72 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Ultragenyx |
| Date 03/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$5.72 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Ultragenyx |
| Date 04/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$5.72 |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) Ultragenyx |
| Date 05/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$5.72 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Ultragenyx |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 82/219 Rpt: 87/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Steve <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | 7 Amount of Contribution (\$) \$5.72 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Ultragenyx |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) C.L. Butaud Wines |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) C.L. Butaud Wines |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) C.L. Butaud Wines |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) C.L. Butaud Wines |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 83/219 Rpt: 88/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Se | | 9 Employer (See Instructions) C.L. Butaud Wines |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Se | | Employer (See Instructions) C.L. Butaud Wines |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, 02280 | Amount of Contribution (\$) \$1.87 |
| Principal occupation / Job title (See Instructions) Material Handler | | Employer (See Instructions) BD |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, 02280 | Amount of Contribution (\$) \$1.87 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) BD |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James <hr/> Contributor address; City; State; Zip Code Belmont, 02280 | Amount of Contribution (\$) \$1.87 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) BD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 84/219 Rpt: 89/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James | 7 Amount of Contribution (\$) \$1.87 |
| 6 Contributor address; City; State; Zip Code Belmont, 02280 | | |
| 8 Principal occupation / Job title (See Instructions) Material Handler | | 9 Employer (See Instructions) BD |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James | Amount of Contribution (\$) \$1.87 |
| Contributor address; City; State; Zip Code Belmont, 02280 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) BD |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, James | Amount of Contribution (\$) \$1.87 |
| Contributor address; City; State; Zip Code Belmont, 02280 | | |
| Principal occupation / Job title (See Instructions) Mechanical Engineer | | Employer (See Instructions) BD |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Everett, WA 98208 | | |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) SSA |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Everett, WA 98208 | | |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) SSA |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 85/219 Rpt: 90/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> 6 Contributor address; City; State; Zip Code Everett, WA 98208 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Client Services Specialist | | 9 Employer (See Instructions) SSA |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> Contributor address; City; State; Zip Code Everett, WA 98208 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) SSA |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> Contributor address; City; State; Zip Code Everett, WA 98208 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) SSA |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstein, Susan <hr/> Contributor address; City; State; Zip Code Everett, WA 98208 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) SSA |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) System Analyst | | Employer (See Instructions) Acadia Pharmaceutical |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 86/219 Rpt: 91/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> 6 Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Grad Student | | 9 Employer (See Instructions) Acadia Pharmaceutical |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Acadia Pharmaceutical |
| Date 04/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Acadia Pharmaceutical |
| Date 05/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Grad Student | | Employer (See Instructions) Acadia Pharmaceutical |
| Date 06/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horan, Sue <hr/> Contributor address; City; State; Zip Code Robbinsville, NJ 08690 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Audio Video Lights Production | | Employer (See Instructions) Acadia Pharmaceutical |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 87/219 Rpt: 92/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> 6 Contributor address; City; State; Zip Code Fort worth, TX 76109 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Independent contractor |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Independent contractor |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Independent contractor |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Independent contractor |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76109 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Independent contractor |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 88/219 Rpt: 93/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubmer, Thomas | 7 Amount of Contribution (\$) \$3.13 |
| 6 Contributor address; City; State; Zip Code Fort worth, TX 76109 | | |
| 8 Principal occupation / Job title (See Instructions) Manager | | 9 Employer (See Instructions) Independent contractor |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Brookline, MA 02446 | | |
| Principal occupation / Job title (See Instructions) Pharmacist | | Employer (See Instructions) Bedford/St. Martin's |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Brookline, MA 02446 | | |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Bedford/St. Martin's |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Brookline, MA 02446 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Bedford/St. Martin's |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William | Amount of Contribution (\$) \$3.57 |
| Contributor address; City; State; Zip Code Brookline, MA 02446 | | |
| Principal occupation / Job title (See Instructions) Pharmacist | | Employer (See Instructions) Bedford/St. Martin's |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 89/219 Rpt: 94/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William <hr/> 6 Contributor address; City; State; Zip Code Brookline, MA 02446 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Pharmacist | | 9 Employer (See Instructions) Bedford/St. Martin's |
| Date 06/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, William <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Bedford/St. Martin's |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Not Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Salesperson | | Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Biz+dev | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 90/219 Rpt: 95/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> 6 Contributor address; City; State; Zip Code Littleton, CO 80125 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) computer consultant | | 9 Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Material Handler | | Employer (See Instructions) Not Employed |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80125 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Therapist | | Employer (See Instructions) Not Employed |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Courier | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 91/219 Rpt: 96/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> 6 Contributor address; City; State; Zip Code Montclair, NJ 07043 | 7 Amount of Contribution (\$) \$2.09 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) RN | | Employer (See Instructions) Not Employed |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07043 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) RN | | Employer (See Instructions) Not Employed |
| Date 01/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland <hr/> Contributor address; City; State; Zip Code Semmes, AL 36575 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) Evonik |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 92/219 Rpt: 97/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland 6 Contributor address; City; State; Zip Code Semmes, AL 36575 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Evonik |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland Contributor address; City; State; Zip Code Semmes, AL 36575 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Evonik |
| Date 04/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Riland Contributor address; City; State; Zip Code Semmes, AL 36575 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Evonik |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg Contributor address; City; State; Zip Code South Boston, MA 02127 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Akamai Technologies |
| Date 02/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg Contributor address; City; State; Zip Code South Boston, MA 02127 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Akamai Technologies |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 93/219 Rpt: 98/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> 6 Contributor address; City; State; Zip Code South Boston, MA 02127 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Akamai Technologies |
| Date 04/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> Contributor address; City; State; Zip Code South Boston, MA 02127 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Akamai Technologies |
| Date 05/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> Contributor address; City; State; Zip Code South Boston, MA 02127 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) ARNP | | Employer (See Instructions) Akamai Technologies |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Greg <hr/> Contributor address; City; State; Zip Code South Boston, MA 02127 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Akamai Technologies |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) College Professor | | Employer (See Instructions) conformis |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 94/219 Rpt: 99/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02127 | 7 Amount of Contribution (\$) \$2.86 |
| 8 Principal occupation / Job title (See Instructions) Rn | | 9 Employer (See Instructions) conformis |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) conformis |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) conformis |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) conformis |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Ita <hr/> Contributor address; City; State; Zip Code Boston, MA 02127 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) conformis |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 95/219 Rpt: 100/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> 6 Contributor address; City; State; Zip Code West Orange, NJ 07052 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Not Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) Not Employed |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Therapist | | Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> Contributor address; City; State; Zip Code West Orange, NJ 07052 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 96/219 Rpt: 101/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirsch, Joey <hr/> 6 Contributor address; City; State; Zip Code West Orange, NJ 07052 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Non Profit | | 9 Employer (See Instructions) Not Employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Prologis |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Prologis |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Prologis |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Client Services Specialist | | Employer (See Instructions) Prologis |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 97/219 Rpt: 102/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80223 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Software Engineer | | 9 Employer (See Instructions) Prologis |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Grant <hr/> Contributor address; City; State; Zip Code Denver, CO 80223 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Lead Scientist | | Employer (See Instructions) Prologis |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Livermore, CA 94550 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) Reynolds Family |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Livermore, CA 94550 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Writer | | Employer (See Instructions) Reynolds Family |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Mar, Linda <hr/> Contributor address; City; State; Zip Code Tumwater, WA 98512 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) Royal Restrooms |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 98/219 Rpt: 103/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> 6 Contributor address; City; State; Zip Code West Chester, PA 19380 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Scoir Inc |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Scoir Inc |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Data Scientist | | Employer (See Instructions) Scoir Inc |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) Scoir Inc |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Scoir Inc |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 99/219 Rpt: 104/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahm, Paul | 7 Amount of Contribution (\$) \$1.25 |
| 6 Contributor address; City; State; Zip Code West Chester, PA 19380 | | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Scoir Inc |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Julie | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Portland, OR 97212 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) none |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Julie | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Portland, OR 97212 | | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) none |
| Date 01/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Port Townsend, WA 98368 | | |
| Principal occupation / Job title (See Instructions) Learning Project Manager | | Employer (See Instructions) Not Employed |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Port Townsend, WA 98368 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 100/219 Rpt: 105/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> 6 Contributor address; City; State; Zip Code Port Townsend, WA 98368 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Learning Project Manager | | 9 Employer (See Instructions) Not Employed |
| Date 04/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Not Employed |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Learning Project Manager | | Employer (See Instructions) Not Employed |
| Date 06/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlois, Ss <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Not Employed |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Winthrop & Weinstine |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 101/219 Rpt: 106/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> 6 Contributor address; City; State; Zip Code Minnetonka, MN 55305 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Graduate Student | | 9 Employer (See Instructions) Winthrop & Weinstine |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Winthrop & Weinstine |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Winthrop & Weinstine |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) Winthrop & Weinstine |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Jan <hr/> Contributor address; City; State; Zip Code Minnetonka, MN 55305 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Winthrop & Weinstine |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 102/219 Rpt: 107/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> 6 Contributor address; City; State; Zip Code Harrison, NJ 07029 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) JP Morgan Chase |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) JP Morgan Chase |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) JP Morgan Chase |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) JP Morgan Chase |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> Contributor address; City; State; Zip Code Harrison, NJ 07029 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Plasterer | | Employer (See Instructions) JP Morgan Chase |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 103/219 Rpt: 108/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laudadio, Robert <hr/> 6 Contributor address; City; State; Zip Code Harrison, NJ 07029 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) JP Morgan Chase |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Self |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Mechanical Engineer | | Employer (See Instructions) Self |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 104/219 Rpt: 109/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Palos Hills, IL 60465 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Civil servant | | 9 Employer (See Instructions) Self |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Phyllis <hr/> Contributor address; City; State; Zip Code Palos Hills, IL 60465 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) MLB Network |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) MLB Network |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon <hr/> Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Rn | | Employer (See Instructions) MLB Network |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 105/219 Rpt: 110/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon | 7 Amount of Contribution (\$) \$3.58 |
| 6 Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | | |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) MLB Network |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon | Amount of Contribution (\$) \$3.58 |
| Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | | |
| Principal occupation / Job title (See Instructions) cancer registry-ctr | | Employer (See Instructions) MLB Network |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laureano, Jonathon | Amount of Contribution (\$) \$3.58 |
| Contributor address; City; State; Zip Code North Plainfield, NJ 07062 | | |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) MLB Network |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) George Mason University |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) George Mason University |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 106/219 Rpt: 111/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| 8 Principal occupation / Job title (See Instructions) Psychotherapist | | 9 Employer (See Instructions) George Mason University |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) George Mason University |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) George Mason University |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Patrice | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Fairfax, VA 22032 | | |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) George Mason University |
| Date 01/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison | Amount of Contribution (\$) \$1.24 |
| Contributor address; City; State; Zip Code Jackson, WY 83002 | | |
| Principal occupation / Job title (See Instructions) Volunteer Director | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 107/219 Rpt: 112/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> 6 Contributor address; City; State; Zip Code Jackson, WY 83002 | 7 Amount of Contribution (\$) \$1.24 |
| 8 Principal occupation / Job title (See Instructions) Software Engineer | | 9 Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Not Employed |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liljestrom, Allison <hr/> Contributor address; City; State; Zip Code Jackson, WY 83002 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 108/219 Rpt: 113/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02134 | 7 Amount of Contribution (\$) \$5.40 |
| 8 Principal occupation / Job title (See Instructions) Community Worker | | 9 Employer (See Instructions) Harvard University |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134 | Amount of Contribution (\$) \$5.40 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Harvard University |
| Date 03/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134 | Amount of Contribution (\$) \$5.40 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Harvard University |
| Date 04/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134 | Amount of Contribution (\$) \$5.40 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Harvard University |
| Date 05/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> Contributor address; City; State; Zip Code Boston, MA 02134 | Amount of Contribution (\$) \$5.40 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Harvard University |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 109/219 Rpt: 114/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipton, Avi <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02134 | 7 Amount of Contribution (\$) \$5.40 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Harvard University |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610 | Amount of Contribution (\$) \$11.11 |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) Salesforce |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610 | Amount of Contribution (\$) \$11.11 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Salesforce |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610 | Amount of Contribution (\$) \$11.11 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Salesforce |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael <hr/> Contributor address; City; State; Zip Code Buda, TX 78610 | Amount of Contribution (\$) \$11.11 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Salesforce |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael | 7 Amount of Contribution (\$) \$11.11 |
| 6 Contributor address; City; State; Zip Code Buda, TX 78610 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Salesforce |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Michael | Amount of Contribution (\$) \$11.11 |
| Contributor address; City; State; Zip Code Buda, TX 78610 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Salesforce |
| Date 01/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony | Amount of Contribution (\$) \$3.58 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Mission Hospice |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony | Amount of Contribution (\$) \$6.25 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Mission Hospice |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony | Amount of Contribution (\$) \$3.58 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Mission Hospice |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 111/219 Rpt: 116/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | 7 Amount of Contribution (\$) \$6.25 |
| 8 Principal occupation / Job title (See Instructions) Winemaker | | 9 Employer (See Instructions) Mission Hospice |
| Date 03/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Mission Hospice |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Winemaker | | Employer (See Instructions) Mission Hospice |
| Date 04/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Recruitment Manager | | Employer (See Instructions) Mission Hospice |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Mission Hospice |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 112/219 Rpt: 117/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | 7 Amount of Contribution (\$) \$3.58 |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Mission Hospice |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Mission Hospice |
| Date 06/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Mission Hospice |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupian, Anthony <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117 | Amount of Contribution (\$) \$6.25 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Mission Hospice |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) u of I hospital |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 113/219 Rpt: 118/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> 6 Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833 | 7 Amount of Contribution (\$) \$2.86 |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) u of I hospital |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) u of I hospital |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Rn | | Employer (See Instructions) u of I hospital |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KEVIN <hr/> Contributor address; City; State; Zip Code Elizabeth, IN 47117-7833 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) u of I hospital |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Disney Cruise Line |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 114/219 Rpt: 119/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> 6 Contributor address; City; State; Zip Code Kissimmee, FL 34741 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Director PV Systems | | 9 Employer (See Instructions) Disney Cruise Line |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Grad Student | | Employer (See Instructions) Disney Cruise Line |
| Date 04/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Audio Video Lights Production | | Employer (See Instructions) Disney Cruise Line |
| Date 05/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Disney Cruise Line |
| Date 06/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, Janelle <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34741 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Disney Cruise Line |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 115/219 Rpt: 120/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer | 7 Amount of Contribution (\$) \$3.00 |
| 6 Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | | |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) CSU |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer | Amount of Contribution (\$) \$3.00 |
| Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) CSU |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer | Amount of Contribution (\$) \$3.00 |
| Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | | |
| Principal occupation / Job title (See Instructions) Proposal Manager | | Employer (See Instructions) CSU |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer | Amount of Contribution (\$) \$3.00 |
| Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) CSU |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer | Amount of Contribution (\$) \$3.00 |
| Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) CSU |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 116/219 Rpt: 121/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahdavi, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Santa Rosa, CA 95405 | 7 Amount of Contribution (\$) \$3.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) CSU |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Research | | Employer (See Instructions) self |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) self |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) self |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 117/219 Rpt: 122/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062 | 7 Amount of Contribution (\$) \$15.00 |
| 8 Principal occupation / Job title (See Instructions) Administrator | | 9 Employer (See Instructions) self |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) self |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) SeatGeek |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) SeatGeek |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) SeatGeek |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 118/219 Rpt: 123/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11226 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Planner | | 9 Employer (See Instructions) SeatGeek |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) SeatGeek |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangiamele, David <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11226 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) SeatGeek |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314 | Amount of Contribution (\$) \$5.56 |
| Principal occupation / Job title (See Instructions) special ed consultant | | Employer (See Instructions) Gibson Dunn & Crutcher LLP |
| Date 02/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314 | Amount of Contribution (\$) \$5.56 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Gibson Dunn & Crutcher LLP |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 119/219 Rpt: 124/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/09/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22314 | 7 Amount of Contribution (\$) \$5.56 |
| 8 Principal occupation / Job title (See Instructions) Senior Sales Engineer | | 9 Employer (See Instructions) Gibson Dunn & Crutcher LLP |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314 | Amount of Contribution (\$) \$5.56 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Gibson Dunn & Crutcher LLP |
| Date 05/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314 | Amount of Contribution (\$) \$5.56 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Gibson Dunn & Crutcher LLP |
| Date 06/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcellesi, Alex <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314 | Amount of Contribution (\$) \$5.56 |
| Principal occupation / Job title (See Instructions) Senior Sales Engineer | | Employer (See Instructions) Gibson Dunn & Crutcher LLP |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Brewery Sales Representative | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 120/219 Rpt: 125/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> 6 Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | 7 Amount of Contribution (\$) \$2.78 |
| 8 Principal occupation / Job title (See Instructions) Brewery Sales Representative | | 9 Employer (See Instructions) Not Employed |
| Date 03/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not Employed |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Brewery Sales Representative | | Employer (See Instructions) Not Employed |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Not Employed |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Fran <hr/> Contributor address; City; State; Zip Code Farmington, NM 87401-8629 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Brewery Sales Representative | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 121/219 Rpt: 126/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> 6 Contributor address; City; State; Zip Code Edina, MN 55436 | 7 Amount of Contribution (\$) \$1.11 |
| 8 Principal occupation / Job title (See Instructions) Doctor | | 9 Employer (See Instructions) State of Minnesota |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436 | Amount of Contribution (\$) \$1.11 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) State of Minnesota |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436 | Amount of Contribution (\$) \$1.11 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) State of Minnesota |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436 | Amount of Contribution (\$) \$1.11 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) State of Minnesota |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel <hr/> Contributor address; City; State; Zip Code Edina, MN 55436 | Amount of Contribution (\$) \$1.11 |
| Principal occupation / Job title (See Instructions) Author | | Employer (See Instructions) State of Minnesota |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 122/219 Rpt: 127/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Daniel | 7 Amount of Contribution (\$) \$1.11 |
| 6 Contributor address; City; State; Zip Code Edina, MN 55436 | | |
| 8 Principal occupation / Job title (See Instructions) Software Engineer | | 9 Employer (See Instructions) State of Minnesota |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Winemaker | | Employer (See Instructions) Zynga Inc |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Zynga Inc |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Zynga Inc |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Zynga Inc |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 123/219 Rpt: 128/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | 7 Amount of Contribution (\$) \$3.13 |
| 6 Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Zynga Inc |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Sean | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code San Francisco, CA 94117 | | |
| Principal occupation / Job title (See Instructions) ARNP | | Employer (See Instructions) Zynga Inc |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code New York, NY 10019 | | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Delta air Lines |
| Date 02/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code New York, NY 10019 | | |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Delta air Lines |
| Date 03/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert | Amount of Contribution (\$) \$2.78 |
| Contributor address; City; State; Zip Code New York, NY 10019 | | |
| Principal occupation / Job title (See Instructions) 12A | | Employer (See Instructions) Delta air Lines |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 124/219 Rpt: 129/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10019 | 7 Amount of Contribution (\$) \$2.78 |
| 8 Principal occupation / Job title (See Instructions) Professor | | 9 Employer (See Instructions) Delta air Lines |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10019 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Delta air Lines |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Robert <hr/> Contributor address; City; State; Zip Code New York, NY 10019 | Amount of Contribution (\$) \$2.78 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Delta air Lines |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664 | Amount of Contribution (\$) \$4.16 |
| Principal occupation / Job title (See Instructions) Advertising | | Employer (See Instructions) Tessian |
| Date 02/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664 | Amount of Contribution (\$) \$4.16 |
| Principal occupation / Job title (See Instructions) Nurse | | Employer (See Instructions) Tessian |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 125/219 Rpt: 130/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664 | 7 Amount of Contribution (\$) \$4.16 |
| 8 Principal occupation / Job title (See Instructions) Nurse | | 9 Employer (See Instructions) Tessian |
| Date 04/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664 | Amount of Contribution (\$) \$4.16 |
| Principal occupation / Job title (See Instructions) Nurse | | Employer (See Instructions) Tessian |
| Date 05/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664 | Amount of Contribution (\$) \$4.16 |
| Principal occupation / Job title (See Instructions) Nurse | | Employer (See Instructions) Tessian |
| Date 06/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNash, Thomas <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664 | Amount of Contribution (\$) \$4.16 |
| Principal occupation / Job title (See Instructions) AP Clerk | | Employer (See Instructions) Tessian |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Operational Strategy | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 126/219 Rpt: 131/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> 6 Contributor address; City; State; Zip Code Valley Village, CA 91607 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Self |
| Date 03/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 05/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 06/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendelovich, Lilach <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 127/219 Rpt: 132/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) School Age Literacy Specialist | | 9 Employer (See Instructions) WorleyParsons |
| Date 01/09/2024 | 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 (\$) \$3.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Tx School for the Blind and Visually Impaired |
| Date 02/09/2024 | 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 (\$) \$3.00 |
| Principal occupation / Job title (See Instructions) Senior Sales Engineer | | Employer (See Instructions) Tx School for the Blind and Visually Impaired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> Contributor address; City; State; Zip Code Cheney, WA 99004 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) Public Health Nutrition | | Employer (See Instructions) Not Employed |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> Contributor address; City; State; Zip Code Cheney, WA 99004 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 128/219 Rpt: 133/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> 6 Contributor address; City; State; Zip Code Cheney, WA 99004 | 7 Amount of Contribution (\$) \$2.08 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 04/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> Contributor address; City; State; Zip Code Cheney, WA 99004 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Not Employed |
| Date 05/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> Contributor address; City; State; Zip Code Cheney, WA 99004 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Not Employed |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patrick <hr/> Contributor address; City; State; Zip Code Cheney, WA 99004 | Amount of Contribution (\$) \$2.08 |
| Principal occupation / Job title (See Instructions) Software Engineering | | Employer (See Instructions) Not Employed |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan <hr/> Contributor address; City; State; Zip Code FPO, AP 96362-2599 | Amount of Contribution (\$) \$14.28 |
| Principal occupation / Job title (See Instructions) Assistant Director | | Employer (See Instructions) Emory |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 129/219 Rpt: 134/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan | 7 Amount of Contribution (\$) \$14.28 |
| 6 Contributor address; City; State; Zip Code FPO, AP 96362-2599 | | |
| 8 Principal occupation / Job title (See Instructions) Psychotherapist | | 9 Employer (See Instructions) Emory |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan | Amount of Contribution (\$) \$14.28 |
| Contributor address; City; State; Zip Code FPO, AP 96362-2599 | | |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) Emory |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan | Amount of Contribution (\$) \$14.28 |
| Contributor address; City; State; Zip Code FPO, AP 96362-2599 | | |
| Principal occupation / Job title (See Instructions) Psychotherapist | | Employer (See Instructions) Emory |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan | Amount of Contribution (\$) \$14.28 |
| Contributor address; City; State; Zip Code FPO, AP 96362-2599 | | |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) Emory |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitch-Hou, Ethan | Amount of Contribution (\$) \$14.28 |
| Contributor address; City; State; Zip Code FPO, AP 96362-2599 | | |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) Emory |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 130/219 Rpt: 135/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> 6 Contributor address; City; State; Zip Code Des Plaines, IL 60018 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Self |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Self |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Public Health Nutrition | | Employer (See Instructions) Self |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60018 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 131/219 Rpt: 136/257 |
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| 4 Date 06/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy-Libel, Kelly <hr/> 6 Contributor address; City; State; Zip Code Des Plaines, IL 60018 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Self |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code Valencia, CA 91354 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Protiviti |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code Valencia, CA 91354 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Protiviti |
| Date 03/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code Valencia, CA 91354 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Protiviti |
| Date 04/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code Valencia, CA 91354 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Protiviti |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 132/219 Rpt: 137/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> 6 Contributor address; City; State; Zip Code Valencia, CA 91354 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Protiviti |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrell, Joseph <hr/> Contributor address; City; State; Zip Code Valencia, CA 91354 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Assistant Editor | | Employer (See Instructions) Protiviti |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) UF |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Se | | Employer (See Instructions) UF |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) UF |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 133/219 Rpt: 138/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32601 | 7 Amount of Contribution (\$) \$12.50 |
| 8 Principal occupation / Job title (See Instructions) professor | | 9 Employer (See Instructions) UF |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Winemaker | | Employer (See Instructions) UF |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Michelle and Ryan <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32601 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) UF |
| Date 01/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213 | Amount of Contribution (\$) \$1.87 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) JPMorgan Chase |
| Date 02/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Gabriel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213 | Amount of Contribution (\$) \$1.87 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) JPMorgan Chase |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 134/219 Rpt: 139/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Gabriel <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11213 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) JPMorgan Chase |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) School Age Literacy Specialist | | Employer (See Instructions) George Washington University |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | Employer (See Instructions) George Washington University |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) George Washington University |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | Employer (See Instructions) George Washington University |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 135/219 Rpt: 140/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20010-2192 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | 9 Employer (See Instructions) George Washington University |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neurohr, Rachel <hr/> Contributor address; City; State; Zip Code Washington, DC 20010-2192 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Research | | Employer (See Instructions) George Washington University |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Taylor <hr/> Contributor address; City; State; Zip Code Austin, TX 78748 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) Stripe Inc. |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Taylor <hr/> Contributor address; City; State; Zip Code Austin, TX 78748 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Software developer | | Employer (See Instructions) Stripe Inc. |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Firefighter | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 136/219 Rpt: 141/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95135 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Medical Coder | | 9 Employer (See Instructions) Not Employed |
| Date 03/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Medical Coder | | Employer (See Instructions) Not Employed |
| Date 04/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) Not Employed |
| Date 05/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Not Employed |
| Date 06/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nispel, Shanna <hr/> Contributor address; City; State; Zip Code San Jose, CA 95135 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 137/219 Rpt: 142/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> 6 Contributor address; City; State; Zip Code Millburn, NJ 07041 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Psychologist | | 9 Employer (See Instructions) Bristol Myers Squibb |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code Millburn, NJ 07041 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Ad tech | | Employer (See Instructions) Bristol Myers Squibb |
| Date 03/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code Millburn, NJ 07041 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Bristol Myers Squibb |
| Date 04/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code Millburn, NJ 07041 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Ad tech | | Employer (See Instructions) Bristol Myers Squibb |
| Date 05/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> Contributor address; City; State; Zip Code Millburn, NJ 07041 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Volunteer Director | | Employer (See Instructions) Bristol Myers Squibb |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 138/219 Rpt: 143/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norsworthy, Timothy <hr/> 6 Contributor address; City; State; Zip Code Millburn, NJ 07041 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Volunteer Director | | 9 Employer (See Instructions) Bristol Myers Squibb |
| Date 04/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivares, Juventino <hr/> Contributor address; City; State; Zip Code Lavon, TX 75166 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | Amount of Contribution (\$) \$2.27 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Not employed |
| Date 02/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | Amount of Contribution (\$) \$2.27 |
| Principal occupation / Job title (See Instructions) Community Worker | | Employer (See Instructions) Not employed |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | Amount of Contribution (\$) \$2.27 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Not employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 139/219 Rpt: 144/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> 6 Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | 7 Amount of Contribution (\$) \$2.27 |
| 8 Principal occupation / Job title (See Instructions) Community Worker | | 9 Employer (See Instructions) Not employed |
| Date 05/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | Amount of Contribution (\$) \$2.27 |
| Principal occupation / Job title (See Instructions) Community Worker | | Employer (See Instructions) Not employed |
| Date 06/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacchiana, Adam <hr/> Contributor address; City; State; Zip Code Sandy Hook, CT 06482 | Amount of Contribution (\$) \$2.27 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Not employed |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code Lake Clear, NY 12945 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) Not Employed |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela <hr/> Contributor address; City; State; Zip Code Lake Clear, NY 12945 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Drug Safety Manger | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 140/219 Rpt: 145/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Lake Clear, NY 12945 | | |
| 8 Principal occupation / Job title (See Instructions) Assistant Editor | | 9 Employer (See Instructions) Not Employed |
| Date 04/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lake Clear, NY 12945 | | |
| Principal occupation / Job title (See Instructions) Drug Safety Manger | | Employer (See Instructions) Not Employed |
| Date 05/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lake Clear, NY 12945 | | |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Not Employed |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Pamela | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lake Clear, NY 12945 | | |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) Not Employed |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Little Rock, AR 72202 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Pappalardo Media Co |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 141/219 Rpt: 146/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> 6 Contributor address; City; State; Zip Code Little Rock, AR 72202 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Pappalardo Media Co |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Pappalardo Media Co |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Pappalardo Media Co |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Data Scientist | | Employer (See Instructions) Pappalardo Media Co |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappalardo, Brian <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72202 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Pappalardo Media Co |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 142/219 Rpt: 147/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Kristina | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code San Francisco, CA 94110 | | |
| 8 Principal occupation / Job title (See Instructions) Mkt Rep | | 9 Employer (See Instructions) Not employed |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Kristina | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code San Francisco, CA 94110 | | |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Not employed |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Kristina | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code San Francisco, CA 94110 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 143/219 Rpt: 148/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | 7 Amount of Contribution (\$) \$3.13 |
| 6 Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Not Employed |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Andrea | Amount of Contribution (\$) \$3.13 |
| Contributor address; City; State; Zip Code Friday Harbor, WA 98250 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 144/219 Rpt: 149/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| 8 Principal occupation / Job title (See Instructions) Computer programmer | | 9 Employer (See Instructions) self employed |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) self employed |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) self employed |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| Principal occupation / Job title (See Instructions) Rn | | Employer (See Instructions) self employed |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrichor, Emily | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Crownsville, MD 21032 | | |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 145/219 Rpt: 150/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phalen, Lizanne <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60615 | 7 Amount of Contribution (\$) \$12.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Self |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> Contributor address; City; State; Zip Code donna, TX 78537 | Amount of Contribution (\$) \$4,300.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> Contributor address; City; State; Zip Code donna, TX 78537 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 05/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> Contributor address; City; State; Zip Code donna, TX 78537 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> Contributor address; City; State; Zip Code donna, TX 78537 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 146/219 Rpt: 151/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Abel <hr/> 6 Contributor address; City; State; Zip Code donna, TX 78537 | 7 Amount of Contribution (\$) \$1,248.91 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Self |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> Contributor address; City; State; Zip Code Lawndale, CA 90260 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Prosum Inc. |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> Contributor address; City; State; Zip Code Lawndale, CA 90260 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Nanny | | Employer (See Instructions) Prosum Inc. |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> Contributor address; City; State; Zip Code Lawndale, CA 90260 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Civil servant | | Employer (See Instructions) Prosum Inc. |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> Contributor address; City; State; Zip Code Lawndale, CA 90260 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Financial advisor | | Employer (See Instructions) Prosum Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 147/219 Rpt: 152/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> 6 Contributor address; City; State; Zip Code Lawndale, CA 90260 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Prosum Inc. |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevas, Frances <hr/> Contributor address; City; State; Zip Code Lawndale, CA 90260 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Prosum Inc. |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Realtor |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Mkt Rep | | Employer (See Instructions) Realtor |
| Date 03/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Realtor |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 148/219 Rpt: 153/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> 6 Contributor address; City; State; Zip Code Hilo, HI 96720 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Realtor |
| Date 05/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Realtor |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przewlocki, Sunita <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Realtor |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pumfrey, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78736-3312 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) Not Employed |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pumfrey, William Ross <hr/> Contributor address; City; State; Zip Code Austin, TX 78736-3312 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 149/219 Rpt: 154/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen 6 Contributor address; City; State; Zip Code MARION, VA 24354 | 7 Amount of Contribution (\$) \$3.58 |
| 8 Principal occupation / Job title (See Instructions) cancer registry-ctr | | 9 Employer (See Instructions) Not Employed |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen Contributor address; City; State; Zip Code MARION, VA 24354 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) engineer | | Employer (See Instructions) Not Employed |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen Contributor address; City; State; Zip Code MARION, VA 24354 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) Not Employed |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen Contributor address; City; State; Zip Code MARION, VA 24354 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) cancer registry-ctr | | Employer (See Instructions) Not Employed |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen Contributor address; City; State; Zip Code MARION, VA 24354 | Amount of Contribution (\$) \$3.58 |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 150/219 Rpt: 155/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahn, Karen | 7 Amount of Contribution (\$) \$3.58 |
| 6 Contributor address; City; State; Zip Code MARION, VA 24354 | | |
| 8 Principal occupation / Job title (See Instructions) Psychotherapist | | 9 Employer (See Instructions) Not Employed |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$7.15 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Author | | Employer (See Instructions) Self |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Self |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$7.15 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Self |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 151/219 Rpt: 156/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | 7 Amount of Contribution (\$) \$7.15 |
| 6 Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| 8 Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | 9 Employer (See Instructions) Self |
| Date 03/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$7.15 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Self |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$7.15 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |

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SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 152/219 Rpt: 157/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/31/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| 8 Principal occupation / Job title (See Instructions) Realtor | | 9 Employer (See Instructions) Self |
| Date 06/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$7.15 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | Employer (See Instructions) Self |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajaraman, Ravindran | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code morganville, NJ 07751 | | |
| Principal occupation / Job title (See Instructions) Public Health Nutrition | | Employer (See Instructions) Self |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Los Angeles, CA 90807 | | |
| Principal occupation / Job title (See Instructions) Software QA Manager | | Employer (See Instructions) Los Angeles County |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Los Angeles, CA 90807 | | |
| Principal occupation / Job title (See Instructions) Data Scientist | | Employer (See Instructions) Los Angeles County |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 153/219 Rpt: 158/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90807 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Los Angeles County |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90807 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Civil servant | | Employer (See Instructions) Los Angeles County |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90807 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Los Angeles County |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redgate, Christopher <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90807 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Civil servant | | Employer (See Instructions) Los Angeles County |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) League of Women Voters - SLC |

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SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 154/219 Rpt: 159/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> 6 Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Research | | 9 Employer (See Instructions) League of Women Voters - SLC |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) League of Women Voters - SLC |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) School Age Literacy Specialist | | Employer (See Instructions) League of Women Voters - SLC |
| Date 05/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) League of Women Voters - SLC |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reymann, Katherine <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) League of Women Voters - SLC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 155/219 Rpt: 160/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94114 | 7 Amount of Contribution (\$) \$1.88 |
| 8 Principal occupation / Job title (See Instructions) computer consultant | | 9 Employer (See Instructions) Apple Inc |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Apple Inc |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Software developer | | Employer (See Instructions) Apple Inc |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Apple Inc |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Apple Inc |

MONETARY POLITICAL CONTRIBUTIONS

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 156/219 Rpt: 161/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Mary <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94114 | 7 Amount of Contribution (\$) \$1.88 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Apple Inc |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Drug Safety Manger | | Employer (See Instructions) Reingold |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Cybersecurity Analyst | | Employer (See Instructions) Reingold |
| Date 03/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Reingold |
| Date 04/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Author | | Employer (See Instructions) Reingold |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 157/219 Rpt: 162/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20009 | 7 Amount of Contribution (\$) \$2.86 |
| 8 Principal occupation / Job title (See Instructions) Software Engineer | | 9 Employer (See Instructions) Reingold |
| Date 06/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Madeline <hr/> Contributor address; City; State; Zip Code Washington, DC 20009 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Reingold |
| Date 01/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code Portland, OR 97213 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Self |
| Date 02/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code Portland, OR 97213 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Self |
| Date 03/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie <hr/> Contributor address; City; State; Zip Code Portland, OR 97213 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Aerospace manager | | Employer (See Instructions) Self |

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 158/219 Rpt: 163/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie | 7 Amount of Contribution (\$) \$3.12 |
| 6 Contributor address; City; State; Zip Code Portland, OR 97213 | | |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Self |
| Date 05/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Portland, OR 97213 | | |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Self |
| Date 06/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockman, Charlie | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Portland, OR 97213 | | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Self |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Towson, MD 21286 | | |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) RK&K |
| Date 02/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Towson, MD 21286 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) RK&K |

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 159/219 Rpt: 164/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> 6 Contributor address; City; State; Zip Code Towson, MD 21286 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Financial Analyst | | 9 Employer (See Instructions) RK&K |
| Date 04/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) RK&K |
| Date 05/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) RK&K |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Brittany <hr/> Contributor address; City; State; Zip Code Towson, MD 21286 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) RK&K |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116 | Amount of Contribution (\$) \$31.25 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) SaneBox |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 160/219 Rpt: 165/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart | 7 Amount of Contribution (\$) \$31.25 |
| 6 Contributor address; City; State; Zip Code Boston, MA 02116 | | |
| 8 Principal occupation / Job title (See Instructions) Aerospace manager | | 9 Employer (See Instructions) SaneBox |
| Date 03/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart | Amount of Contribution (\$) \$31.25 |
| Contributor address; City; State; Zip Code Boston, MA 02116 | | |
| Principal occupation / Job title (See Instructions) Operational Strategy | | Employer (See Instructions) SaneBox |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart | Amount of Contribution (\$) \$31.25 |
| Contributor address; City; State; Zip Code Boston, MA 02116 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) SaneBox |
| Date 05/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart | Amount of Contribution (\$) \$31.25 |
| Contributor address; City; State; Zip Code Boston, MA 02116 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) SaneBox |
| Date 06/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart | Amount of Contribution (\$) \$31.25 |
| Contributor address; City; State; Zip Code Boston, MA 02116 | | |
| Principal occupation / Job title (See Instructions) Actor | | Employer (See Instructions) SaneBox |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 161/219 Rpt: 166/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> 6 Contributor address; City; State; Zip Code Zanesville, OH 43701 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator | | 9 Employer (See Instructions) Muskingum County Library System |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> Contributor address; City; State; Zip Code Zanesville, OH 43701 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Muskingum County Library System |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> Contributor address; City; State; Zip Code Zanesville, OH 43701 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Research | | Employer (See Instructions) Muskingum County Library System |
| Date 04/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Cory <hr/> Contributor address; City; State; Zip Code Zanesville, OH 43701 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Expert Consultant | | Employer (See Instructions) Muskingum County Library System |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) US Army |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 162/219 Rpt: 167/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> 6 Contributor address; City; State; Zip Code APO, AE 09114 | 7 Amount of Contribution (\$) \$2.77 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) US Army |
| Date 03/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Brewery Sales Representative | | Employer (See Instructions) US Army |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) US Army |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) US Army |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudis, Joshua <hr/> Contributor address; City; State; Zip Code APO, AE 09114 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) US Army |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 163/219 Rpt: 168/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> 6 Contributor address; City; State; Zip Code Brightwood, OR 97011 | 7 Amount of Contribution (\$) \$15.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not employed |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 03/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 04/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Firefighter | | Employer (See Instructions) Not employed |
| Date 05/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> Contributor address; City; State; Zip Code Brightwood, OR 97011 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Firefighter | | Employer (See Instructions) Not employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 164/219 Rpt: 169/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Connie <hr/> 6 Contributor address; City; State; Zip Code Brightwood, OR 97011 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Firefighter | | 9 Employer (See Instructions) Not employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) Facebook |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Facebook |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Facebook |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) Facebook |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 165/219 Rpt: 170/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> 6 Contributor address; City; State; Zip Code Somerville, MA 02143 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Client Services Specialist | | 9 Employer (See Instructions) Facebook |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Timothy <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Facebook |
| Date 05/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, William <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11231 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Drug Safety Manger | | Employer (See Instructions) William sanders |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Programmer | | Employer (See Instructions) AWS |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) AWS |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 166/219 Rpt: 171/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) AWS |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjay, Supriya <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) AWS |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Mkt Rep | | Employer (See Instructions) Fedex |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Fedex |
| Date 03/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scannell, Mike <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952-1615 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Fedex |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 167/219 Rpt: 172/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> 6 Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Scientist | | 9 Employer (See Instructions) CDI |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Chemist | | Employer (See Instructions) CDI |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) System Analyst | | Employer (See Instructions) CDI |
| Date 04/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Grad Student | | Employer (See Instructions) CDI |
| Date 05/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) System Analyst | | Employer (See Instructions) CDI |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 168/219 Rpt: 173/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, David <hr/> 6 Contributor address; City; State; Zip Code Huntington Beach, CA 92648 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Director PV Systems | | 9 Employer (See Instructions) CDI |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Nurse | | Employer (See Instructions) Not Employed |
| Date 02/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) special ed consultant | | Employer (See Instructions) Not Employed |
| Date 03/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) researcher | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 169/219 Rpt: 174/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/09/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> 6 Contributor address; City; State; Zip Code Kent, OH 44240 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 06/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schierhorn, Carl <hr/> Contributor address; City; State; Zip Code Kent, OH 44240 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) researcher | | Employer (See Instructions) Newmark |
| Date 02/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Scientist | | Employer (See Instructions) Newmark |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Community Worker | | Employer (See Instructions) Newmark |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 170/219 Rpt: 175/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 75750 | 7 Amount of Contribution (\$) \$1.24 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Newmark |
| Date 05/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Newmark |
| Date 06/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotland, James <hr/> Contributor address; City; State; Zip Code Tucson, AZ 75750 | Amount of Contribution (\$) \$1.24 |
| Principal occupation / Job title (See Instructions) Grad Student | | Employer (See Instructions) Newmark |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoufos, Jeannette <hr/> Contributor address; City; State; Zip Code Anthem, AZ 85086 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) UVA Hospital |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 171/219 Rpt: 176/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22901 | 7 Amount of Contribution (\$) \$2.09 |
| 8 Principal occupation / Job title (See Instructions) Self Employed | | 9 Employer (See Instructions) UVA Hospital |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) UVA Hospital |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) UVA Hospital |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) UVA Hospital |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppe, Suzanne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) UVA Hospital |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 172/219 Rpt: 177/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> 6 Contributor address; City; State; Zip Code Durango, CO 81301 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) none |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) College Professor | | Employer (See Instructions) none |
| Date 03/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Solution engineer | | Employer (See Instructions) none |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) none |
| Date 05/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverman, Georgi <hr/> Contributor address; City; State; Zip Code Durango, CO 81301 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) none |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 173/219 Rpt: 178/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Alec | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code Nashville, TN 37216 | | |
| 8 Principal occupation / Job title (See Instructions) AP Clerk | | 9 Employer (See Instructions) Agency |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley | Amount of Contribution (\$) \$2.09 |
| Contributor address; City; State; Zip Code Indianapolis, IN 46202 | | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Digitas |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley | Amount of Contribution (\$) \$2.09 |
| Contributor address; City; State; Zip Code Indianapolis, IN 46202 | | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Digitas |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley | Amount of Contribution (\$) \$2.09 |
| Contributor address; City; State; Zip Code Indianapolis, IN 46202 | | |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) Digitas |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley | Amount of Contribution (\$) \$2.09 |
| Contributor address; City; State; Zip Code Indianapolis, IN 46202 | | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Digitas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 174/219 Rpt: 179/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley <hr/> 6 Contributor address; City; State; Zip Code Indianapolis, IN 46202 | 7 Amount of Contribution (\$) \$2.09 |
| 8 Principal occupation / Job title (See Instructions) Planner | | 9 Employer (See Instructions) Digitas |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Halley <hr/> Contributor address; City; State; Zip Code Indianapolis, IN 46202 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Client Services Specialist | | Employer (See Instructions) Digitas |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> Contributor address; City; State; Zip Code Starkville, MS 39759 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Director PV Systems | | Employer (See Instructions) Northwestern University |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> Contributor address; City; State; Zip Code Starkville, MS 39759 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Northwestern University |
| Date 03/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> Contributor address; City; State; Zip Code Starkville, MS 39759 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Director PV Systems | | Employer (See Instructions) Northwestern University |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 175/219 Rpt: 180/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> 6 Contributor address; City; State; Zip Code Starkville, MS 39759 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Scientist | | 9 Employer (See Instructions) Northwestern University |
| Date 05/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> Contributor address; City; State; Zip Code Starkville, MS 39759 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Audio Video Lights Production | | Employer (See Instructions) Northwestern University |
| Date 06/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soares, Leigh <hr/> Contributor address; City; State; Zip Code Starkville, MS 39759 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) System Analyst | | Employer (See Instructions) Northwestern University |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stapleton, Rev. Carolyn L. <hr/> Contributor address; City; State; Zip Code Windcrest, TX 78239 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) St. Johns United Methodist Church |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Myself |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 176/219 Rpt: 181/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> 6 Contributor address; City; State; Zip Code Longmont, CO 80501 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Myself |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Myself |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Actor | | Employer (See Instructions) Myself |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Mkt Rep | | Employer (See Instructions) Myself |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stauffer, Allyson <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Myself |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 177/219 Rpt: 182/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10023 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Nanny | | 9 Employer (See Instructions) Not employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) Not employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Administrative Asst. | | Employer (See Instructions) Not employed |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Not employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 178/219 Rpt: 183/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Alexandra <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10023 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not employed |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code Pullman, WA 99163 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Administration | | Employer (See Instructions) Not Employed |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code Pullman, WA 99163 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Volunteer Director | | Employer (See Instructions) Not Employed |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code Pullman, WA 99163 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) Not Employed |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew <hr/> Contributor address; City; State; Zip Code Pullman, WA 99163 | Amount of Contribution (\$) \$2.09 |
| Principal occupation / Job title (See Instructions) lawyer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 179/219 Rpt: 184/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew | 7 Amount of Contribution (\$) \$2.09 |
| 6 Contributor address; City; State; Zip Code Pullman, WA 99163 | | |
| 8 Principal occupation / Job title (See Instructions) Public Health Nutrition | | 9 Employer (See Instructions) Not Employed |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Andrew | Amount of Contribution (\$) \$2.09 |
| Contributor address; City; State; Zip Code Pullman, WA 99163 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine | Amount of Contribution (\$) \$2.00 |
| Contributor address; City; State; Zip Code Marana, AZ 85658 | | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Not Employed |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine | Amount of Contribution (\$) \$2.00 |
| Contributor address; City; State; Zip Code Marana, AZ 85658 | | |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Not Employed |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine | Amount of Contribution (\$) \$2.00 |
| Contributor address; City; State; Zip Code Marana, AZ 85658 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 180/219 Rpt: 185/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> 6 Contributor address; City; State; Zip Code Marana, AZ 85658 | 7 Amount of Contribution (\$) \$2.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Not Employed |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> Contributor address; City; State; Zip Code Marana, AZ 85658 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Proposal Manager | | Employer (See Instructions) Not Employed |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Still, Francine <hr/> Contributor address; City; State; Zip Code Marana, AZ 85658 | Amount of Contribution (\$) \$2.00 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Not Employed |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Actor | | Employer (See Instructions) Messari |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Actor | | Employer (See Instructions) Messari |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 181/219 Rpt: 186/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> 6 Contributor address; City; State; Zip Code Wynnewood, PA 19006 | 7 Amount of Contribution (\$) \$1.75 |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Messari |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Aerospace manager | | Employer (See Instructions) Messari |
| Date 05/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Aerospace manager | | Employer (See Instructions) Messari |
| Date 06/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Matthew <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19006 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Aerospace manager | | Employer (See Instructions) Messari |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Eileen <hr/> Contributor address; City; State; Zip Code Newton, MA 02459 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Psychotherapist | | Employer (See Instructions) Boston College |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 182/219 Rpt: 187/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Eileen <hr/> 6 Contributor address; City; State; Zip Code Newton, MA 02459 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Producer | | 9 Employer (See Instructions) Boston College |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Boeing |
| Date 02/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Boeing |
| Date 03/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Boeing |
| Date 04/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Boeing |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 183/219 Rpt: 188/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/23/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> 6 Contributor address; City; State; Zip Code Kirkland, WA 98034 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Planner | | 9 Employer (See Instructions) Boeing |
| Date 06/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamble, Adam <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Boeing |
| Date 01/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Phd Student | | Employer (See Instructions) Not Employed |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Not Employed |
| Date 03/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 184/219 Rpt: 189/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Phd Student | | 9 Employer (See Instructions) Not Employed |
| Date 05/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Not Employed |
| Date 06/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Peter <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Community Worker | | Employer (See Instructions) Not Employed |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Not Employed |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 185/219 Rpt: 190/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> 6 Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | 7 Amount of Contribution (\$) \$3.13 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Lyft Driver | | Employer (See Instructions) Not Employed |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiede, Sara <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907 | Amount of Contribution (\$) \$3.13 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Client Services Specialist | | Employer (See Instructions) Ford Motor Company |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 186/219 Rpt: 191/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> 6 Contributor address; City; State; Zip Code Plymouth, MI 48170 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Advertising | | 9 Employer (See Instructions) Ford Motor Company |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) Ford Motor Company |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Ford Motor Company |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Senior Management Analyst | | Employer (See Instructions) Ford Motor Company |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tims, Ian <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Advertising | | Employer (See Instructions) Ford Motor Company |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 187/219 Rpt: 192/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Audio Video Lights Production | | 9 Employer (See Instructions) Not Employed |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Audio Video Lights Production | | Employer (See Instructions) Not Employed |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Audio Video Lights Production | | Employer (See Instructions) Not Employed |
| Date 04/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Not Employed |
| Date 05/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Advertising | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 188/219 Rpt: 193/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Planner | | 9 Employer (See Instructions) Not Employed |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867 | Amount of Contribution (\$) \$1.66 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Kronos Bio |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867 | Amount of Contribution (\$) \$1.66 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Kronos Bio |
| Date 03/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867 | Amount of Contribution (\$) \$1.66 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Kronos Bio |
| Date 04/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867 | Amount of Contribution (\$) \$1.66 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Kronos Bio |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 189/219 Rpt: 194/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth | 7 Amount of Contribution (\$) \$1.66 |
| 6 Contributor address; City; State; Zip Code Reading, MA 01867 | | |
| 8 Principal occupation / Job title (See Instructions) Assistant Editor | | 9 Employer (See Instructions) Kronos Bio |
| Date 06/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Elizabeth | Amount of Contribution (\$) \$1.66 |
| Contributor address; City; State; Zip Code Reading, MA 01867 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Kronos Bio |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | | |
| Principal occupation / Job title (See Instructions) Biz+dev | | Employer (See Instructions) Self |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | | |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Self |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan | Amount of Contribution (\$) \$3.12 |
| Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 190/219 Rpt: 195/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> 6 Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Self |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Therapist | | Employer (See Instructions) Self |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautman, Allan <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Data Scientist | | Employer (See Instructions) Self |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code Redwood valley, CA 95470 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code Redwood valley, CA 95470 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 191/219 Rpt: 196/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin <hr/> 6 Contributor address; City; State; Zip Code Redwood valley, CA 95470 | 7 Amount of Contribution (\$) \$2.77 |
| 8 Principal occupation / Job title (See Instructions) Drug Safety Manger | | 9 Employer (See Instructions) Self |
| Date 05/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code Redwood valley, CA 95470 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Learning & Development Manager | | Employer (See Instructions) Self |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Marvin <hr/> Contributor address; City; State; Zip Code Redwood valley, CA 95470 | Amount of Contribution (\$) \$2.77 |
| Principal occupation / Job title (See Instructions) Drug Safety Manger | | Employer (See Instructions) Self |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) Not Employed |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 192/219 Rpt: 197/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> 6 Contributor address; City; State; Zip Code Kalaheo, HI 96741 | 7 Amount of Contribution (\$) \$3.57 |
| 8 Principal occupation / Job title (See Instructions) Marketing | | 9 Employer (See Instructions) Not Employed |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Proposal Manager | | Employer (See Instructions) Not Employed |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Not Employed |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsuneyoshi, Naomi <hr/> Contributor address; City; State; Zip Code Kalaheo, HI 96741 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) accountant | | Employer (See Instructions) Not Employed |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22043 | Amount of Contribution (\$) \$12.50 |
| Principal occupation / Job title (See Instructions) Software developer | | Employer (See Instructions) Marriott |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 193/219 Rpt: 198/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick | 7 Amount of Contribution (\$) \$12.50 |
| 6 Contributor address; City; State; Zip Code Falls Church, VA 22043 | | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Marriott |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Falls Church, VA 22043 | | |
| Principal occupation / Job title (See Instructions) Therapist | | Employer (See Instructions) Marriott |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Falls Church, VA 22043 | | |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) Marriott |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Falls Church, VA 22043 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Marriott |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Patrick | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Falls Church, VA 22043 | | |
| Principal occupation / Job title (See Instructions) Puppeteer | | Employer (See Instructions) Marriott |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 194/219 Rpt: 199/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared | 7 Amount of Contribution (\$) \$1.00 |
| 6 Contributor address; City; State; Zip Code Addis, LA 70710 | | |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Not Employed |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Addis, LA 70710 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Addis, LA 70710 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Addis, LA 70710 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Addis, LA 70710 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 195/219 Rpt: 200/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veal, Jared <hr/> 6 Contributor address; City; State; Zip Code Addis, LA 70710 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Mkt Rep | | 9 Employer (See Instructions) Not Employed |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) General Atomics |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) General Atomics |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) General Atomics |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) General Atomics |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 196/219 Rpt: 201/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92126 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Financial advisor | | 9 Employer (See Instructions) General Atomics |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virgen, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) tech writer | | Employer (See Instructions) General Atomics |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Mechanical Engineer | | Employer (See Instructions) Levelset |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waguespack, Eric <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70130 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Mechanical Engineer | | Employer (See Instructions) Levelset |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> Contributor address; City; State; Zip Code Rochester, MN 55901 | Amount of Contribution (\$) \$2.14 |
| Principal occupation / Job title (See Instructions) Medical Coder | | Employer (See Instructions) The Nature Conservancy |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 197/219 Rpt: 202/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> 6 Contributor address; City; State; Zip Code Rochester, MN 55901 | 7 Amount of Contribution (\$) \$2.14 |
| 8 Principal occupation / Job title (See Instructions) cancer registry-ctr | | 9 Employer (See Instructions) The Nature Conservancy |
| Date 03/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> Contributor address; City; State; Zip Code Rochester, MN 55901 | Amount of Contribution (\$) \$2.14 |
| Principal occupation / Job title (See Instructions) cancer registry-ctr | | Employer (See Instructions) The Nature Conservancy |
| Date 04/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> Contributor address; City; State; Zip Code Rochester, MN 55901 | Amount of Contribution (\$) \$2.14 |
| Principal occupation / Job title (See Instructions) Medical Coder | | Employer (See Instructions) The Nature Conservancy |
| Date 05/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> Contributor address; City; State; Zip Code Rochester, MN 55901 | Amount of Contribution (\$) \$2.14 |
| Principal occupation / Job title (See Instructions) Medical Coder | | Employer (See Instructions) The Nature Conservancy |
| Date 06/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Marissa <hr/> Contributor address; City; State; Zip Code Rochester, MN 55901 | Amount of Contribution (\$) \$2.14 |
| Principal occupation / Job title (See Instructions) Medical Coder | | Employer (See Instructions) The Nature Conservancy |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 198/219 Rpt: 203/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Rylan <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97330 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Nurse Practitioner | | 9 Employer (See Instructions) Oregon State University |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Freelance |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Financial advisor | | Employer (See Instructions) Freelance |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Freelance |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte <hr/> Contributor address; City; State; Zip Code Greenville, SC 29605 | Amount of Contribution (\$) \$1.88 |
| Principal occupation / Job title (See Instructions) Software developer | | Employer (See Instructions) Freelance |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 199/219 Rpt: 204/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte | 7 Amount of Contribution (\$) \$1.88 |
| 6 Contributor address; City; State; Zip Code Greenville, SC 29605 | | |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Freelance |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Charlotte | Amount of Contribution (\$) \$1.88 |
| Contributor address; City; State; Zip Code Greenville, SC 29605 | | |
| Principal occupation / Job title (See Instructions) Attorney/Mediator | | Employer (See Instructions) Freelance |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Milwaukie, OR 97222 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Not Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Milwaukie, OR 97222 | | |
| Principal occupation / Job title (See Instructions) Material Handler | | Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Milwaukie, OR 97222 | | |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 200/219 Rpt: 205/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> 6 Contributor address; City; State; Zip Code Milwaukie, OR 97222 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> Contributor address; City; State; Zip Code Milwaukie, OR 97222 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Puppeteer | | Employer (See Instructions) Not Employed |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waugh, Emily <hr/> Contributor address; City; State; Zip Code Milwaukie, OR 97222 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Software QA Manager | | Employer (See Instructions) Not Employed |
| Date 01/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Learning Project Manager | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 201/219 Rpt: 206/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92103 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Self |
| Date 04/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Learning Project Manager | | Employer (See Instructions) Self |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Lead Scientist | | Employer (See Instructions) Self |
| Date 06/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Self |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 202/219 Rpt: 207/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Realtor | | 9 Employer (See Instructions) Not Employed |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Suzanne <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 203/219 Rpt: 208/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> 6 Contributor address; City; State; Zip Code Mountain View, CA 94043 | 7 Amount of Contribution (\$) \$6.87 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Attunity |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043 | Amount of Contribution (\$) \$6.87 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Attunity |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043 | Amount of Contribution (\$) \$6.87 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) Attunity |
| Date 04/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043 | Amount of Contribution (\$) \$6.87 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Attunity |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043 | Amount of Contribution (\$) \$6.87 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Attunity |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 204/219 Rpt: 209/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, Doug <hr/> 6 Contributor address; City; State; Zip Code Mountain View, CA 94043 | 7 Amount of Contribution (\$) \$6.87 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Attunity |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Senior Sales Engineer | | Employer (See Instructions) Texas Childrens Hospital |
| Date 02/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) AP Clerk | | Employer (See Instructions) Texas Childrens Hospital |
| Date 03/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) AP Clerk | | Employer (See Instructions) Texas Childrens Hospital |
| Date 04/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Texas Childrens Hospital |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 205/219 Rpt: 210/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025 | 7 Amount of Contribution (\$) \$1.43 |
| 8 Principal occupation / Job title (See Instructions) AP Clerk | | 9 Employer (See Instructions) Texas Childrens Hospital |
| Date 06/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggans, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) 12A | | Employer (See Instructions) Texas Childrens Hospital |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code Oakland, CA 94602 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Not Employed |
| Date 02/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code Oakland, CA 94602 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff <hr/> Contributor address; City; State; Zip Code Oakland, CA 94602 | Amount of Contribution (\$) \$1.75 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 206/219 Rpt: 211/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff | 7 Amount of Contribution (\$) \$1.75 |
| 6 Contributor address; City; State; Zip Code Oakland, CA 94602 | | |
| 8 Principal occupation / Job title (See Instructions) ARNP | | 9 Employer (See Instructions) Not Employed |
| Date 05/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff | Amount of Contribution (\$) \$1.75 |
| Contributor address; City; State; Zip Code Oakland, CA 94602 | | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Not Employed |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Jeff | Amount of Contribution (\$) \$1.75 |
| Contributor address; City; State; Zip Code Oakland, CA 94602 | | |
| Principal occupation / Job title (See Instructions) Medical Social Worker | | Employer (See Instructions) Not Employed |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David | Amount of Contribution (\$) \$2.50 |
| Contributor address; City; State; Zip Code Chandler, AZ 85224 | | |
| Principal occupation / Job title (See Instructions) accountant | | Employer (See Instructions) Honeywell |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David | Amount of Contribution (\$) \$2.50 |
| Contributor address; City; State; Zip Code Chandler, AZ 85224 | | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Honeywell |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 207/219 Rpt: 212/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> 6 Contributor address; City; State; Zip Code Chandler, AZ 85224 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) accountant | | 9 Employer (See Instructions) Honeywell |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85224 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Honeywell |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85224 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) accountant | | Employer (See Instructions) Honeywell |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85224 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Honeywell |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) RN | | Employer (See Instructions) ISO New Englad |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 208/219 Rpt: 213/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Northampton, MA 01060 | 7 Amount of Contribution (\$) \$2.50 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) ISO New Englad |
| Date 03/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Courier | | Employer (See Instructions) ISO New Englad |
| Date 04/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) professor | | Employer (See Instructions) ISO New Englad |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) ISO New Englad |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Jennifer <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060 | Amount of Contribution (\$) \$2.50 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) ISO New Englad |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 209/219 Rpt: 214/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10027 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |
| Date 03/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |
| Date 04/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> Contributor address; City; State; Zip Code New York, NY 10027 | Amount of Contribution (\$) \$3.12 |
| Principal occupation / Job title (See Instructions) physician | | Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 210/219 Rpt: 215/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolverton, Benjamin <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10027 | 7 Amount of Contribution (\$) \$3.12 |
| 8 Principal occupation / Job title (See Instructions) Associate | | 9 Employer (See Instructions) Arnold & Porter Kaye Scholer LLP |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Horse Trainer | | Employer (See Instructions) Pixar Animation Studios |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodbury, Adam <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131 | Amount of Contribution (\$) \$3.57 |
| Principal occupation / Job title (See Instructions) Analyst | | Employer (See Instructions) Pixar Animation Studios |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Actor | | Employer (See Instructions) Plum Creek Records & Tapes |
| Date 04/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Plum Creek Records & Tapes |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 211/219 Rpt: 216/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max | 7 Amount of Contribution (\$) \$5.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78765 | | |
| 8 Principal occupation / Job title (See Instructions) Actor | | 9 Employer (See Instructions) Plum Creek Records & Tapes |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Austin, TX 78765 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Plum Creek Records & Tapes |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Rocklin, CA 95765 | | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Cubizm |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Rocklin, CA 95765 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Cubizm |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce | Amount of Contribution (\$) \$1.00 |
| Contributor address; City; State; Zip Code Rocklin, CA 95765 | | |
| Principal occupation / Job title (See Instructions) Programmer | | Employer (See Instructions) Cubizm |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 212/219 Rpt: 217/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce <hr/> 6 Contributor address; City; State; Zip Code Rocklin, CA 95765 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Biz+dev | | 9 Employer (See Instructions) Cubizm |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce <hr/> Contributor address; City; State; Zip Code Rocklin, CA 95765 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Software QA Manager | | Employer (See Instructions) Cubizm |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandell, Bruce <hr/> Contributor address; City; State; Zip Code Rocklin, CA 95765 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Biz+dev | | Employer (See Instructions) Cubizm |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not employed |
| Date 02/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) Not employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 213/219 Rpt: 218/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94115 | 7 Amount of Contribution (\$) \$2.86 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not employed |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) 12A | | Employer (See Instructions) Not employed |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) pilot | | Employer (See Instructions) Not employed |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Caity <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115 | Amount of Contribution (\$) \$2.86 |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) Not employed |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049 | Amount of Contribution (\$) \$1.43 |
| Principal occupation / Job title (See Instructions) Rn | | Employer (See Instructions) Baylor Scott and White |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 214/219 Rpt: 219/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code Lawrence, KS 66049 | | |
| 8 Principal occupation / Job title (See Instructions) Firefighter | | 9 Employer (See Instructions) Baylor Scott and White |
| Date 03/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lawrence, KS 66049 | | |
| Principal occupation / Job title (See Instructions) Firefighter | | Employer (See Instructions) Baylor Scott and White |
| Date 04/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lawrence, KS 66049 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Baylor Scott and White |
| Date 05/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lawrence, KS 66049 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Baylor Scott and White |
| Date 06/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kellyn | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code Lawrence, KS 66049 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Baylor Scott and White |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 215/219 Rpt: 220/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji | 7 Amount of Contribution (\$) \$1.25 |
| 6 Contributor address; City; State; Zip Code Olivebridge, NY 12461 | | |
| 8 Principal occupation / Job title (See Instructions) Non Profit | | 9 Employer (See Instructions) Not Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Olivebridge, NY 12461 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Olivebridge, NY 12461 | | |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) Not Employed |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Olivebridge, NY 12461 | | |
| Principal occupation / Job title (See Instructions) Graduate Student | | Employer (See Instructions) Not Employed |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code Olivebridge, NY 12461 | | |
| Principal occupation / Job title (See Instructions) Research | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 216/219 Rpt: 221/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zintz, Marji <hr/> 6 Contributor address; City; State; Zip Code Olivebridge, NY 12461 | 7 Amount of Contribution (\$) \$1.25 |
| 8 Principal occupation / Job title (See Instructions) Programmer | | 9 Employer (See Instructions) Not Employed |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Salesperson | | Employer (See Instructions) ramapo college |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) ramapo college |
| Date 03/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) ramapo college |
| Date 04/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11238 | Amount of Contribution (\$) \$1.25 |
| Principal occupation / Job title (See Instructions) Sales Management | | Employer (See Instructions) ramapo college |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 217/219 Rpt: 222/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan | 7 Amount of Contribution (\$) \$1.25 |
| 6 Contributor address; City; State; Zip Code brooklyn, NY 11238 | | |
| 8 Principal occupation / Job title (See Instructions) Non Profit | | 9 Employer (See Instructions) ramapo college |
| Date 06/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lipkin, jonathan | Amount of Contribution (\$) \$1.25 |
| Contributor address; City; State; Zip Code brooklyn, NY 11238 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) ramapo college |
| Date 01/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Deloitte |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| Principal occupation / Job title (See Instructions) accountant | | Employer (See Instructions) Deloitte |
| Date 03/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Deloitte |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 218/219 Rpt: 223/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | 7 Amount of Contribution (\$) \$1.43 |
| 6 Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| 8 Principal occupation / Job title (See Instructions) accountant | | 9 Employer (See Instructions) Deloitte |
| Date 05/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Deloitte |
| Date 06/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wachs, miriam | Amount of Contribution (\$) \$1.43 |
| Contributor address; City; State; Zip Code New Jersey, NJ 07302 | | |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Deloitte |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen | Amount of Contribution (\$) \$6.11 |
| Contributor address; City; State; Zip Code Bremerton, WA 98310 | | |
| Principal occupation / Job title (See Instructions) Flight attendant | | Employer (See Instructions) us navy |
| Date 02/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen | Amount of Contribution (\$) \$6.11 |
| Contributor address; City; State; Zip Code Bremerton, WA 98310 | | |
| Principal occupation / Job title (See Instructions) 12A | | Employer (See Instructions) us navy |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 219/219 Rpt: 224/257 |
| 2 FILER NAME Cambio Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> 6 Contributor address; City; State; Zip Code Bremerton, WA 98310 | 7 Amount of Contribution (\$) \$6.11 |
| 8 Principal occupation / Job title (See Instructions) Professor | | 9 Employer (See Instructions) us navy |
| Date 04/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310 | Amount of Contribution (\$) \$6.11 |
| Principal occupation / Job title (See Instructions) Not employed | | Employer (See Instructions) us navy |
| Date 05/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310 | Amount of Contribution (\$) \$6.11 |
| Principal occupation / Job title (See Instructions) Brewery Sales Representative | | Employer (See Instructions) us navy |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wild, stephen <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310 | Amount of Contribution (\$) \$6.11 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) us navy |

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: 1/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
|-----------------------------------------------------|-----------------------------------------|----------------------------------------------------------|

| | |
|-----------------------------|---------------------------------|
| 4 Date 04/29/2024 | 5 Payee name 7-Eleven |
|-----------------------------|---------------------------------|

| | |
|---------------------------------|-------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$15.99 | 7 Payee address; City; State; Zip Code 613 Congress Ave Austin, TX 78701 |
|---------------------------------|-------------------------------------------------------------------------------------------|

Expenditure from corporate funds

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

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

| | |
|--------------------|---------------------|
| Date 04/11/2024 | Payee name Adobe |
|--------------------|---------------------|

| | |
|------------------------|----------------------------------------------------------------------------------------|
| Amount (\$) \$22.72 | Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704 |
|------------------------|----------------------------------------------------------------------------------------|

Expenditure from corporate funds

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

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

| | |
|--------------------|---------------------|
| Date 05/13/2024 | Payee name Adobe |
|--------------------|---------------------|

| | |
|------------------------|----------------------------------------------------------------------------------------|
| Amount (\$) \$22.72 | Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704 |
|------------------------|----------------------------------------------------------------------------------------|

Expenditure from corporate funds

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

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

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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: 2/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/11/2024 | 5 Payee name Adobe | |
| 6 Amount (\$) \$22.72 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110-2704 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/19/2024 | Payee name Amazon | |
| Amount (\$) \$124.43 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/25/2024 | Payee name Amazon | |
| Amount (\$) \$37.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Supplies |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
|-----------------------------------------------------|-----------------------------------------|----------------------------------------------------------|

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| 4 Date 03/25/2024 | 5 Payee name Amazon |
|-----------------------------|-------------------------------|

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| 6 Amount (\$) \$475.83 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 |
|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|

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

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

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|--------------------|----------------------|
| Date 04/01/2024 | Payee name Amazon |
|--------------------|----------------------|

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|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Amount (\$) \$69.22 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|

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

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

| | |
|--------------------|----------------------|
| Date 04/02/2024 | Payee name Amazon |
|--------------------|----------------------|

| | |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Amount (\$) \$146.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|

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

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

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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.

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| 1 Total pages Schedule F1: Sch: 4/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/16/2024 | 5 Payee name Amazon | |
| 6 Amount (\$) \$102.95 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/24/2024 | Payee name Amazon | |
| Amount (\$) \$33.30 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/20/2024 | Payee name Amazon | |
| Amount (\$) \$420.51 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies |
| 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.

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| 1 Total pages Schedule F1: Sch: 5/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/20/2024 | 5 Payee name Best Buy | |
| 6 Amount (\$) \$1,248.91 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 8012 N 10th St McAllen, TX 78504 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/27/2024 | Payee name Best Buy | |
| Amount (\$) \$348.92 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 8012 N 10th St McAllen, TX 78504 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/13/2024 | Payee name Brandboosters | |
| Amount (\$) \$500.25 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Costs |
| 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.

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|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 6/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/05/2024 | 5 Payee name Brandboosters | |
| 6 Amount (\$) \$1,424.87 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print costs |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/04/2024 | Payee name Brandboosters | |
| Amount (\$) \$1,400.84 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Costs |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/30/2024 | Payee name Brandboosters | |
| Amount (\$) \$200.94 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 7/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/06/2024 | 5 Payee name Brandboosters | |
| 6 Amount (\$) \$1,476.28 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 301 N McColl Rd Suite G McAllen, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense print expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/29/2024 | Payee name Buccees | |
| Amount (\$) \$67.70 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 327 Hwy 2004 Rd Lake Jackson, TX 77566 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Cannon | |
| Amount (\$) \$1,852.57 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code One Canon Park Melville, NY 11747 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Equipment |
| 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.

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| 1 Total pages Schedule F1: Sch: 8/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 04/29/2024 | 5 Payee name Carts Smartcenter |
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| 6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1334 Brittmoores Rd Houston, TX 77043 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel expense |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/22/2024 | Payee name Chilis |
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| Amount (\$) \$59.18 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 521 E Nolana Ave McAllen, TX 78504 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/08/2024 | Payee name Civitech |
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| Amount (\$) \$520.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1023 Springdale Rd Austin, TX 78721 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 9/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 05/16/2024 | 5 Payee name Civitech | |
| 6 Amount (\$) \$31.67 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1023 Springdale Rd Austin, TX 78721 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/12/2024 | Payee name ConstantContact | |
| Amount (\$) \$160.91 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/12/2024 | Payee name ConstantContact | |
| Amount (\$) \$229.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 10/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/03/2024 | 5 Payee name ConstantContact | |
| 6 Amount (\$) \$229.88 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/12/2024 | Payee name ConstantContact | |
| Amount (\$) \$229.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/26/2024 | Payee name Cricket | |
| Amount (\$) \$89.06 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1025 Lenox Park Atlanta, GA 30319 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 11/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/18/2024 | 5 Payee name Cricket | |
| 6 Amount (\$) \$98.40 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1025 Lenox Park Atlanta, GA 30319 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/20/2024 | Payee name Cricket | |
| Amount (\$) \$34.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1025 Lenox Park Atlanta, GA 30319 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utility expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/18/2024 | Payee name Cricket | |
| Amount (\$) \$46.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1025 Lenox Park Atlanta, GA 30319 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utility expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 12/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/18/2024 | 5 Payee name Crooked Media | |
| 6 Amount (\$) \$349.14 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 6555 Barton Avenue Suite 510 Los Angeles, CA 90038 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/16/2024 | Payee name DJI Service LLC | |
| Amount (\$) \$867.48 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 17301 Edwards Road Cerritos, CA 90703 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Recording Equipment |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/25/2024 | Payee name Dai Tung | |
| Amount (\$) \$33.52 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2400 Brock St Mission, TX 78572 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 13/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 04/25/2024 | 5 Payee name Delta Airlines |
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| 6 Amount (\$) \$312.40 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1030 Delta Blvd Atlanta, GA 30354 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel expense |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/05/2024 | Payee name Domit Executive Business Center |
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| Amount (\$) \$935.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Domit Executive Business Center |
|--------------------|-----------------------------------------------|

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| Amount (\$) \$925.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 14/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 03/06/2024 | 5 Payee name Domit Executive Business Center |
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| 6 Amount (\$) \$925.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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|--------------------|-----------------------------------------------|
| Date 04/03/2024 | Payee name Domit Executive Business Center |
|--------------------|-----------------------------------------------|

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| Amount (\$) \$925.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent Expense |
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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 05/03/2024 | Payee name Domit Executive Business Center |
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| Amount (\$) \$975.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rental expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 15/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/06/2024 | 5 Payee name Domit Executive Business Center | |
| 6 Amount (\$) \$925.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO AVE EDINBURG, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rental expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/19/2024 | Candidate/Officeholder name El Gato | |
| Amount (\$) \$303.09 <input type="checkbox"/> Expenditure from corporate funds | Office sought 508 Pecore Street Houston, TX 77009 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Meals |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/02/2024 | Candidate/Officeholder name Google Gsuite | |
| Amount (\$) \$27.54 <input type="checkbox"/> Expenditure from corporate funds | Office sought 1600 Amphitheatre Parkway Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 16/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 05/02/2024 | 5 Payee name Google Gsuite |
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| 6 Amount (\$) \$30.70 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/03/2024 | Payee name Google Gsuite |
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| Amount (\$) \$30.70 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/26/2024 | Payee name Hertz |
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| Amount (\$) \$66.87 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 8501 Williams Rd Estero, FL 33928 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 17/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 04/12/2024 | 5 Payee name Home Depot |
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| 6 Amount (\$) \$77.94 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 801 Trenton Rd McAllen, TX 78504 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies |
|---------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/17/2024 | Payee name Home Depot |
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| Amount (\$) \$21.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 801 Trenton Rd McAllen, TX 78504 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event supplies |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/30/2024 | Payee name Home Depot |
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| Amount (\$) \$27.56 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 801 Trenton Rd McAllen, TX 78504 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvass supplies |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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|------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 18/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
|------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|

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| 4 Date 04/12/2024 | 5 Payee name Hustle |
|-----------------------------|-------------------------------|

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| 6 Amount (\$) \$752.14 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 595 Market St., Suite 920 San Francisco, TX 94105 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/30/2024 | Payee name Hut's Hamburgers |
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| Amount (\$) \$49.48 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 05/01/2024 | Payee name Juice Us |
|--------------------|------------------------|

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| Amount (\$) \$12.99 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1703 W Trenton Rd Edinburg, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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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.

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| 1 Total pages Schedule F1: Sch: 19/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 01/31/2024 | 5 Payee name Lone Star National Bank | |
| 6 Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/06/2024 | Payee name Lone Star National Bank | |
| Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/31/2024 | Payee name Lone Star National Bank | |
| Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 20/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/28/2024 | 5 Payee name Lone Star National Bank | |
| 6 Amount (\$) \$7.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 600 E Nolana Ave MCALLEN, TX 78504 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 05/06/2024 | Candidate/Officeholder name Payee name Longhorn Steakhouse | |
| Amount (\$) \$94.57 <input type="checkbox"/> Expenditure from corporate funds | Office sought Payee address; City; State; Zip Code 7401 N 10th St McAllen, TX 78504 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 03/25/2024 | Candidate/Officeholder name Payee name Microsoft | |
| Amount (\$) \$10.81 <input type="checkbox"/> Expenditure from corporate funds | Office sought Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA 98052 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software expense |
| Complete ONLY if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 21/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/25/2024 | 5 Payee name Microsoft | |
| 6 Amount (\$) \$10.81 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA 98052 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/23/2024 | Payee name Microsoft | |
| Amount (\$) \$10.81 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA 98052 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription cost |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | Payee name Microsoft | |
| Amount (\$) \$10.81 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA 98052 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 22/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 03/19/2024 | 5 Payee name Minute Key |
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| 6 Amount (\$) \$6.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/08/2024 | Payee name Public Research Group |
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| Amount (\$) \$650.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BTB Stipends |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

| | |
|--------------------|-------------------------------------|
| Date 01/08/2024 | Payee name Public Research Group |
|--------------------|-------------------------------------|

| | |
|------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Amount (\$) \$650.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BTB Stipends |
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| 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.

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| 1 Total pages Schedule F1: Sch: 23/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 02/05/2024 | 5 Payee name Public Research Group |
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| 6 Amount (\$) \$650.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BTB |
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|---------------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

| | |
|--------------------|-------------------------------------|
| Date 02/08/2024 | Payee name Public Research Group |
|--------------------|-------------------------------------|

| | |
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| Amount (\$) \$650.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 |
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|------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BTB |
|------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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| Date 02/12/2024 | Payee name Public Research Group |
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| Amount (\$) \$1,300.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 24/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 02/12/2024 | 5 Payee name Public Research Group | |
| 6 Amount (\$) \$974.64 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/07/2024 | Payee name Public Research Group | |
| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Project Deliverable |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/08/2024 | Payee name Public Research Group | |
| Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 135 Paseo Del Prado Edinburg, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research Costs |
| 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.

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| 1 Total pages Schedule F1: Sch: 25/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 04/10/2024 | 5 Payee name Rolling Stone |
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| 6 Amount (\$) \$7.99 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 475 Fifth Avenue New York, NY 10017 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription Cost |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 05/20/2024 | Payee name Rolling Stone |
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| Amount (\$) \$7.99 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 475 Fifth Avenue New York, NY 10017 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription cost |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/10/2024 | Payee name Rolling Stone |
|--------------------|-----------------------------|

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|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Amount (\$) \$7.99 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 475 Fifth Avenue New York, NY 10017 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription cost |
|------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 26/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 06/20/2024 | 5 Payee name Salad Station | |
| 6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2500 W Trenton Rd Edinburg, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | Payee name Salad Station | |
| Amount (\$) \$39.54 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2500 W Trenton Rd Edinburg, TX 78539 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/08/2024 | Payee name Spectrum | |
| Amount (\$) \$165.73 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Services |
| 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.

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| 1 Total pages Schedule F1: Sch: 27/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 03/25/2024 | 5 Payee name Spectrum |
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| 6 Amount (\$) \$80.41 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Utilities |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 04/25/2024 | Payee name Spectrum |
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| Amount (\$) \$80.41 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense |
|------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 05/28/2024 | Payee name Spectrum |
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| Amount (\$) \$80.41 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utility expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 28/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
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| 4 Date 06/18/2024 | 5 Payee name Spectrum |
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| 6 Amount (\$) \$80.41 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 400 Atlantic Street Stamford, CT 06901 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utility expense |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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|--------------------|-------------------------|
| Date 06/10/2024 | Payee name Starbucks |
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| Amount (\$) \$26.27 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code TX |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 05/02/2024 | Payee name Stripes |
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| Amount (\$) \$36.38 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code TX |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel expense |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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.

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| 1 Total pages Schedule F1: Sch: 29/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/29/2024 | 5 Payee name Texaco | |
| 6 Amount (\$) \$10.80 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 729 E. Slaughter Austin, TX 78744 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/27/2024 | Payee name United Airlines | |
| Amount (\$) \$249.98 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 233 S. Wacker Drive Chicago, IL 60606 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/29/2024 | Payee name Wafflehouse | |
| Amount (\$) \$32.41 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 7809 E. Ben White Austin, TX 78744 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 30/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 03/18/2024 | 5 Payee name Wal Mart | |
| 6 Amount (\$) \$123.19 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/25/2024 | Candidate/Officeholder name Wal Mart | |
| Amount (\$) \$78.48 <input type="checkbox"/> Expenditure from corporate funds | Office sought Wal Mart | |
| Office held | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Canvassing Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing Supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2024 | Candidate/Officeholder name Wal Mart | |
| Amount (\$) \$72.59 <input type="checkbox"/> Expenditure from corporate funds | Office sought Wal Mart | |
| Office held | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date | Candidate/Officeholder name | |
| Amount (\$) | 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.

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| 1 Total pages Schedule F1: Sch: 31/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/10/2024 | 5 Payee name Wal Mart | |
| 6 Amount (\$) \$35.15 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Canvass Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvass Supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/12/2024 | Payee name Wal Mart | |
| Amount (\$) \$224.84 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/16/2024 | Payee name Wal Mart | |
| Amount (\$) \$147.53 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing Supplies |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 32/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
| 4 Date 04/22/2024 | 5 Payee name Wal Mart | |
| 6 Amount (\$) \$43.94 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/24/2024 | Payee name Wal Mart | |
| Amount (\$) \$342.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1421 W Frontage Rd Alamo, TX 78516 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/03/2024 | Payee name Wix.Com | |
| Amount (\$) \$36.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 33/33 Rpt: | 2 FILER NAME Cambio Texas PAC | 3 Filer ID (Ethics Commission Filers) 00082985 |
|------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|

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|-----------------------------|--------------------------------|
| 4 Date 05/03/2024 | 5 Payee name Wix.Com |
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| 6 Amount (\$) \$36.80 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110 |
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|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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|--------------------|-----------------------|
| Date 06/03/2024 | Payee name Wix.Com |
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|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Amount (\$) \$38.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software expense |
|-------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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