#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00024940 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Society Of Anesthesiologists Political Action Committee Date Received **ELECTRONICALLY FILED** 08/01/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 401 W. 15th St. #990 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Dr. Kristyn B. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Ingram CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 401 West 15th Street, Suite 990 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 401 W. 15th St. #990 MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 370-1659 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2024 07/25/2024

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

			1	
L2 COMMITTEE NAME		ation O marries	13 Filer ID	(Ethics Commission Filers)
Texas Society Of An	esthesiologists Political A	ction Committee	0002494	0
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location	7. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,432.37
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	19,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	T DAY \$	261,984.07
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
.6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	erjury, that the ormation requir	e accompanying report is ed to be reported by me
		Dr Krist	yn B. Ingram	
		Signature of C		
		Signature of Co	ampaign ricas	Suici
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscri	bed before me, by the said _	,	this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Ciematum ( "	a palmaimina a sistema e e e e e	Drinted name of officer administrative in	Tid. C.	finan administrator at the state of the stat
Signature of officer	r administering oath	Printed name of officer administering oath	litle of of	ficer administering oath

### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3 3 of 29

				3 of 29
7 COMMITT	EE NAME	18 Filer ID	(Ethics Commis	sion Filers)
Texas So	ciety Of Anesthesiologists Political Action Committee	00024940		
	E SUBTOTALS SCHEDULE		SUBTOTA	L AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	9,432.37
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABORGANIZATION	OR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORC	GANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	२	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$	19,000.00
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	IONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/23 Rpt: 4/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	Filers)
4	Date 07/12/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$85.00
8	Principal occu	Houston, TX 77059 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician  Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Alquicira-Macedo, Fernando Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	Houston, TX 77085 pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: An, Daniel Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$67.00
		Fulshear, TX 77441 pation / Job title (See Instructions)	Employer (See Instructions	(i)		
	Physician  Date  07/12/2024	Full name of contributor out-of-state PAC (ID#: Anton, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	Houston, TX 77009 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#: Arango, Daniel Contributor address; City; State; Zip Code Galveston, TX 77554			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/23 Rpt: 5/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/15/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$84.00
_	<u> </u>	Allen, TX 75013				
8	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#: Bacak, Christina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Deinsinal	Austin, TX 78704	England (One leading to a	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$150.00
		College Station, TX 77845				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$8.33
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/23 Rpt: 6/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		7	Amount of Contribution (\$)	\$250.00
_		Beaumont, TX 77726				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Bradley, Stephanie Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$41.67
	Dringinal occu	Houston, TX 77005	Employer (See Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Buda, TX 78610				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Butler, Brad  Contributor address; City; State; Zip Code  Abilene, TX 79602			Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Carroll, Luke  Contributor address; City; State; Zip Code  Houston, TX 77042			Amount of Contribution (\$)	\$85.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/23 Rpt: 7/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 06/27/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$21.00
_	5	Friendswood, TX 77546				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_Cattano, Davide  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$42.00
		Houston, TX 77030				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/15/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$84.00
		San Antonio, TX 78256				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_ Conner, William Contributor address; City; State; Zip Code  Murphy, TX 75094			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#:_ Danley, Matthew  Contributor address; City; State; Zip Code  Fort Worth, TX 76109	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
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	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/23 Rpt: 8/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Davila-Perez, Ruben</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$21.00
8	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Physician	pation / Job title (See Instructions)	Employer (See instructions	·)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ De Lanzac, Kraig  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$41.67
	Deinsinal assu	New Orleans, LA 70112	Translavar (Coo Instructions	<u></u>		
	Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#:_DiGiovanni, Ryan  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Southlake, TX 76092				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#:_ Drees, Jeffrey  Contributor address; City; State; Zip Code  Corsicana, TX 75110	)		Amount of Contribution (\$)	\$85.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#:_ Dupont, Cedric  Contributor address; City; State; Zip Code  Rollingwood, TX 78746			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to	o complete this for	n.	1	Total pages Schedule A1: Sch: 6/23 Rpt: 9/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political	Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/15/2024	<ul><li>5 Full name of contributor Ellis, Stephen</li><li>6 Contributor address; City; State</li></ul>		)	7	Amount of Contribution (\$)	\$84.00
		Dallas, TX 75219					
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/15/2024	Full name of contributor Erian, Ralph Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 		
	Physician	,			,		
	Date 07/03/2024	Full name of contributor Farley, Elizabeth Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$84.00
		Austin, TX 78759					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/24/2024	Full name of contributor Farrow-Gillespie, Alan Contributor address; City; State Dallas, TX 75204	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$42.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor Garcia-Bigger, Judy Contributor address; City; State Round Rock, TX 78665	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$166.67
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/23 Rpt: 10/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/12/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$42.00
_	Dringing Loon	Houston, TX 77005	O Employer (Coe Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_Glover, Chris  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu	Houston, TX 77030 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician	valion / 300 title (See matractions)	Employer (See instructions	,		
	Date 07/10/2024	Full name of contributor  out-of-state PAC (ID#:_Gloyna, David  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$67.00
		Salado, TX 76571				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_Gloyna, David  Contributor address; City; State; Zip Code  Salado, TX 76571			Amount of Contribution (\$)	\$118.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/25/2024	Full name of contributor out-of-state PAC (ID#:_Goff, Kristina  Contributor address; City; State; Zip Code  Dallas, TX 75229	)		Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
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	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete th	is for	rm.	1	Total pages Schedule A1: Sch: 8/23 Rpt: 11/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committe	ee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/01/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$30.00
_		Dallas, TX 75201	- 1-		_		
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC ( Gurkowski, Mary Ann  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$83.34
	Dringing age	San Antonio, TX 78240		Employer (Coo Instructions	<u></u>		
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC ( Hancher-Hodges, Shannon  Contributor address; City; State; Zip Code	ID#:	)		Amount of Contribution (\$)	\$67.00
		Bellaire, TX 77401					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC ( Hardman, Bailor  Contributor address; City; State; Zip Code  Dallas, TX 75205				Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/17/2024	Full name of contributor out-of-state PAC ( Harvey, Benjamin  Contributor address; City; State; Zip Code  Spring, TX 77379	ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/23 Rpt: 12/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		7	Amount of Contribution (\$)	\$84.00
_		San Antonio, TX 78258				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Hendrix, Joseph Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing age	San Antonio, TX 78218	Employer (Coo Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	•)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Hernandez, Nadia Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$84.00
		Pearland, TX 77584				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<b>(</b> )		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$42.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/15/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/23 Rpt: 13/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/08/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$45.00
_	5	Beaumont, TX 77705				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_ Hutson, Larry  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Deinsinal assu	Temple, TX 76502	Franksian (Coo Instructions	$\overline{}$		
	Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#:_ Igler, Eric Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		San Angelo, TX 76904				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/09/2024	Full name of contributor out-of-state PAC (ID#:_ Jenkins, Kalan  Contributor address; City; State; Zip Code  Salado, TX 76571	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Zachary  Contributor address; City; State; Zip Code  Frisco, TX 75036			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/23 Rpt: 14/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	ı Filers)
4	Date 07/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Karnes, Paden</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$67.00
0	Dringing oggu	Houston, TX 77030	Employer (See Instructions	<u></u>		
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	·)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#: Kercheville, Scott Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$67.00
		San Antonio, TX 78215				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Khorsand, Sarah Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$84.00
		Dallas, TX 75229				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Kolle, Bracken  Contributor address; City; State; Zip Code  Houston, TX 77042		•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Konvicka, James  Contributor address; City; State; Zip Code  Belton, TX 76513		•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 12/23 Rpt: 15/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/03/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$20.00
_	5	League City, TX 77573				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#: Kwater, Andrzej Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Deire die alle access	Houston, TX 77009	Every Construction	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/02/2024	Full name of contributor out-of-state PAC (ID#: Liang, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.83
		San Antonio, TX 78240				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (ID#:_Lindberg, Scott  Contributor address; City; State; Zip Code  Katy, TX 77494			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/23 Rpt: 16/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	ı Filers)
4	Date 07/12/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Markham, Travis</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$)	\$84.00
_		Houston, TX 77030	1			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Martinez, Robert  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$67.00
	Principal occu	Karnes City, TX 78118 pation / Job title (See Instructions)	Employer (See Instructions	) 		
	Physician	oduon / Job title (Jee matidetions)	Employer (See manucuons	')		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Masel, Brian  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$67.00
		Galveston, TX 77555				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#: Matuszczak, Maria  Contributor address; City; State; Zip Code  Houston, TX 77098	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: McWilliams, Sara  Contributor address; City; State; Zip Code  Boerne, TX 78006			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 14/23 Rpt: 17/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee	e	3	Filer ID (Ethics Commission 00024940	ı Filers)
4	Date 07/10/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$84.00
_		Austin, TX 78731	- I	Ĺ		
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID Merchun, Christopher  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$41.67
	Dringing agg	Dallas, TX 75219	Employer (See Instruction	<u></u>		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/15/2024	Full name of contributor out-of-state PAC (ID Mercier, David  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$84.00
		Dallas, TX 75229				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID Miller, Christopher  Contributor address; City; State; Zip Code  Arlington, TX 76015	)#:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID Moorman, Andrew  Contributor address; City; State; Zip Code  Dallas, TX 75219	· #:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			,			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 15/23 Rpt: 18/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee	e	3	Filer ID (Ethics Commission 00024940	ı Filers)
4	Date 07/10/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$67.00
		Austin, TX 78746				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (IE Mouzi-Wofford, Lisa  Contributor address; City; State; Zip Code	) #:)		Amount of Contribution (\$)	\$84.00
	Dringinal occu	Houston, TX 77007	Employer (See Instruction	<u></u>		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	>)		
	Date 07/02/2024	Full name of contributor  out-of-state PAC (IE Muse, Kenisha  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$84.00
		Temple, TX 76502				
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (IE Normand, Katherine Contributor address; City; State; Zip Code Houston, TX 77079	) #:)	•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 		
	Date 07/02/2024	Full name of contributor out-of-state PAC (IE Norrell, Stacy  Contributor address; City; State; Zip Code  Magnolia, TX 77355	) :	•	Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			'			

	MONET	ARY POLITICAL CONT	RIBUTIONS	<b>i</b>		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to com	plete this form.		1	Total pages Schedule A1: Sch: 16/23 Rpt: 19/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action	Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor  out-of-Obanor, Osamudiamen</li> <li>Contributor address; City; State; Zip Contributor</li> </ul>		)	7	Amount of Contribution (\$)	\$67.00
		Houston, TX 77054					
8	Principal occu Physician	pation / Job title (See Instructions)	9 E	mployer (See Instructions)	)		
	Date 07/11/2024	Full name of contributor out-of-Odeh, Jaffer  Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$67.00
	Principal occu	Dallas, TX 75390 pation / Job title (See Instructions)	T F	mployer (See Instructions)	<u> </u>		
	Physician	sation / cost title (cost methodisms)		mproyer (eee meadeache)	,		
	Date 07/03/2024	Full name of contributor out-of-Omojola, Adeola  Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$750.00
		Houston, TX 77030					
	Principal occu Physician	pation / Job title (See Instructions)	E	mployer (See Instructions)	)		
	Date 07/10/2024	Ortiz, Jaime	state PAC (ID#: ode	)		Amount of Contribution (\$)	\$67.00
	Principal occu Physician	oation / Job title (See Instructions)	E	mployer (See Instructions)	)		
	Date 07/03/2024	Full name of contributor out-of- Padakandla, Udaya  Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	E	mployer (See Instructions)	)		
			ľ				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/23 Rpt: 20/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$8.33
_		Fort Worth, TX 76107				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Perry, Jeremie  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu	Abilene, TX 79606 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician	sation / Job title (See Instructions)	Employer (See manuchons	')		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Phillips, Cooper  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$41.67
		Lubbock, TX 79430				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Plagenhoef, Jeffrey  Contributor address; City; State; Zip Code  Southlake, TX 76092			Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Quintela, Heather  Contributor address; City; State; Zip Code  San Antonio, TX 78248			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 18/23 Rpt: 21/29	
2	FILER NAME Texas Socie	ty Of Anesthesiologists Politica	I Action Committee		3	Filer ID (Ethics Commission 00024940	Filers)
4	Date 07/15/2024	<ul><li>5 Full name of contributor Rahlfs, Thomas</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$83.34
		Houston, TX 77079					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date 07/15/2024	Full name of contributor  Rebal, Brett  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	Austin, TX 78746 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 07/12/2024	Full name of contributor Reed, LoriJean Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$84.00
_		Dallas, TX 75230 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 07/05/2024	Full name of contributor Remster, Jeffrey Contributor address; City; Sta				Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 07/12/2024	Full name of contributor Richards, Jeffrey  Contributor address; City; Sta	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	€ A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 19/23 Rpt: 22/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political A	Action Committee		3	Filer ID (Ethics Commission 00024940	Filers)
4	Date 07/10/2024	<ul><li>5 Full name of contributor Ritter, Eric</li><li>6 Contributor address; City; State;</li></ul>			7	Amount of Contribution (\$)	\$20.83
		Houston, TX 77018	1-				
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>		
	Date 07/10/2024	Full name of contributor Rondeau, Bryan Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$83.34
	Principal occu	Temple, TX 76502 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date 07/09/2024	Full name of contributor  Rutland, Lindsey  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$84.00
		Austin, TX 78723					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 07/12/2024	Full name of contributor Sarmiento, Stephen Contributor address; City; State; Plano, TX 75093	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$85.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/12/2024	Full name of contributor  Selassie, Rahel  Contributor address; City; State;  Manvel, TX 77578	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	()		
			<b>'</b>				

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/23 Rpt: 23/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	ı Filers)
4	Date 07/10/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$67.00
_	Deignigal	Galveston, TX 77551	Contain (Contain the Contain t			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID# Shu, Stephen  Contributor address; City; State; Zip Code	<u>*)</u>		Amount of Contribution (\$)	\$84.00
		Dallas, TX 75219	_			
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/12/2024	Full name of contributor  uut-of-state PAC (ID# Stamatakos, Todd  Contributor address; City; State; Zip Code	<u>+:</u>		Amount of Contribution (\$)	\$85.00
		Frisco, TX 75034				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID# Steiner, Jeffrey  Contributor address; City; State; Zip Code  Dallas, TX 75390	<u>;                                    </u>		Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID# Street, Austin  Contributor address; City; State; Zip Code  Dallas, TX 75229	<u>*)</u>		Amount of Contribution (\$)	\$67.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			<u>'</u>			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/23 Rpt: 24/29	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 07/15/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$62.50
8	Dringing aggu	Galveston, TX 77555	Employer (See Instructions			
•	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tsai, January  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Dringing! goog	Houston, TX 77005	Employer (See Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 07/12/2024	Full name of contributor	)		Amount of Contribution (\$)	\$62.50
		Southlake, TX 76092				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/12/2024	Full name of contributor out-of-state PAC (ID#:_ Vu-Boyer, Lisa Contributor address; City; State; Zip Code  Dallas, TX 75219	)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_ Weiss, Lisa Contributor address; City; State; Zip Code  Houston, TX 77018			Amount of Contribution (\$)	\$83.34
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 22/23 Rpt: 25/29	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	Filers)
4	Date 06/26/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$84.00
		Addison, TX 75001				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#: West, Mary  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Irving, TX 75061 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Physician Physician	,				
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Woods, Amy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$67.00
		Dallas, TX 75390				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/12/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$83.34
	Principal occu Physician	Houston, TX 77005 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/03/2024	Full name of contributor out-of-state PAC (ID#:_Zaafran, Sherif  Contributor address; City; State; Zip Code  Houston, TX 77055			Amount of Contribution (\$)	\$75.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
		-				

The Instruction Guide explains how to complete this form.  1 Total pages Schedule A1: Sch: 23/23 Rpt: 26/29  2 FILER NAME Texas Society Of Anesthesiologists Political Action Committee  4 Date 07/10/2024  6 Contributor address; City; State; Zip Code  Houston, TX 77004  8 Principal occupation / Job title (See Instructions) Physician  1 Total pages Schedule A1: Sch: 23/23 Rpt: 26/29  3 Filer ID (Ethics Commission Filers) 00024940  7 Amount of Contribution (\$)  \$84.00		MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
Texas Society Of Anesthesiologists Political Action Committee  4 Date   5 Full name of contributor   out-of-state PAC (ID#:		The Instruction Guide explains how to complete this form.		
07/10/2024 Zavala, Acsa \$84.00  6 Contributor address; City; State; Zip Code  Houston, TX 77004  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	2			
8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	4	07/10/2024 Zavala, Acsa	7 /	
Physician Physic	8		ions)	

PLEI	DGED CONTRIBUT	TONS				SCHEDULE B	
Т	he Instruction Guide expl	1	1 Total pages Schedule B: Sch: 1/1 Rpt: 27/29				
2 FILER N	AME			3 Filer ID (Ethics Commission Filers)			
Texas S	Society Of Anesthesiologists Po	olitical Action Committe	ee		00024940	•	
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES			Ť	\$	0.00	
<b>5</b> Date	6 Full name of pledgor out-of-state PAC (ID#:)		) 8		-kind description		
		_			pledge (\$)	(If applicable)	
	7 Pledgor Address;	City; State; Zip Code	,				
					Check if travel outside of T	exas. Complete Schedule T.	
<b>10</b> Principal	occupation / Job title (See Instruc	tions)	11 Employer (See Ins	structi	ons)		

	LOANS						sc	HEDULE	E		
	The Instruction Guide explains how to complete this form					pages Schedule E: 1/1 Rpt: 28/29					
2	FILER NAME  Texas Society Of Anesthesiologists Political Action Committee				3 Filer ID (Ethics Comn 00024940			mission File	ers)		
4	TOTAL OF UN	IITEMIZED LOANS			I		\$		0.00		
5	Date of loan	7 Name of lender out-of-state	te PA	C (ID#:		)	9 Loan Am	ount (\$)			
6	Is lender a financial institution?	8 Lender address; City; State	te;	Zip Code			10 Interest F				
							<b>11</b> Maturity [	Date			
12	2 Principal occupation / Job title (See Instructions)			13 Employer (See Instructions)							
14	Description of Coll	Description of Collateral			15 Check if personal funds were deposited				d into political account (See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount C	- Guaranteed	(\$)		
	not applicable	18 Guarantor address; City; State	te;	Zip Code							
20	Principal occupation	on		21 Employer (See Inst	tructions)						

## 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 Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 1/1 Rpt: 29/29	Texas Society Of Anesthesiologists Political Action 00024940					
4 Date	5 Payee name					
07/15/2024	Anchia, Rafael					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,500.00	P. O. Box 4468					
Expenditure from corporate funds	Dallas, TX 75208					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
EXI ENDITORE	Candidate/Officeholder/Political Committee					
	Campaign contribution					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
experientare to benefit Great						
Date	Payee name					
06/27/2024	Oliverson M.D., Tom (Dr.)					
Amount (\$)	Payee address; City; State; Zip Code					
\$12,500.00	1 East Greenway Plaza					
	Suite 225					
Expenditure from corporate funds	Houston, TX 77046					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By					
EXPENDITURE	Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI	1					
Date	Payee name					
06/29/2024	Schwertner, Charles					
Amount (\$)	Payee address; City; State; Zip Code					
\$5,000.00	P. O. Box 2448					
Expenditure from corporate funds	Georgetown, TX 78627					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
EAFEINDITURE	Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
onponditure to beliefit 6/01	•					