

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM MPAC
COVER SHEET PG 1**

The MPAC Instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00016346	2 Total pages filed: 79
3 COMMITTEE NAME Texas State Teachers Association - PAC		OFFICE USE ONLY
		Date Received ELECTRONICALLY FILED 09/04/2024
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 8716 N Mopac Expy Austin, TX 78759	
5 CAMPAIGN TREASURER NAME	Date Hand-delivered or Date Postmarked	
MS / MRS / MR FIRST MI Ms. Portia	Receipt # Amount	
NICKNAME LAST SUFFIX Bosse	Date Processed	
	Date Imaged	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8716 N Mopac Expy Austin, TX 78759	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8716 N Mopac Expy Austin, TX 78759	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 476-5355	
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)	
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input checked="" type="checkbox"/> September 5 <input type="checkbox"/> December 5	
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/26/2024 08/25/2024	

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas State Teachers Association - PAC	13 Filer ID (Ethics Commission Filers) 00016346
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Joint PAC fundraising transfer to NEA Fund for Children & Public Education for authorized purposes
		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	\$ 3,567.90
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,408.56
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 52,791.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 101,099.16
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.

Ms. Portia Bosse

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

MONTHLY FILING GPAC REPORT: PURPOSE

12 COMMITTEE NAME Texas State Teachers Association - PAC	13 Filer ID (Ethics Commission Filers) 00016346
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Solomon Ortiz 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.)	

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 Mr. 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.)	

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 Ms. Sheryl Cole 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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC	13 Filer ID (Ethics Commission Filers) 00016346
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Vikki Goodwin 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.)	

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 Ms. Donna Howard 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.)	

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 Rep. Gina Hinojosa 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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC		13 Filer ID (Ethics Commission Filers) 00016346
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 Ms. Jennie Birkholz 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.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Dawn Richardson 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.)	
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 Ms. Jennifer Lee 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.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Mihaela Plesa 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.)	

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 Mr. Eddie Morales 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.)	

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 Mr. Vince Perez 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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC		13 Filer ID (Ethics Commission Filers) 00016346
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 Ms. Cecilia Castellano 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.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Denise Wilkerson 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.)	
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 Mr. Chris Turner 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.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Terry Meza 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.)	

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 Ms. Linda Garcia 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.)	

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 Ms. Rhetta Andrews Bowers 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.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. John Bryant 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.)	

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 Ms. Cassandra Hernandez 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.)	

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 Mr. Trey Martinez Fischer 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.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Philip Cortez 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.)	

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 Ms. Laurel Jordan Swift 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.)	

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 Ms. Josey Garcia 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.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Ann Johnson 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.)	

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 Mr. John Bucy 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.)	

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 Mr. Gene Wu 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.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Charlene Ward Johnson 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.)	

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 Mr. Harold Dutton Jr. 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.)	

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 Ms. Jolanda Jones 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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC	13 Filer ID (Ethics Commission Filers) 00016346
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Penny Shaw 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.)	

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 Ms. Carol Alvarado State Senator
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Molly Cook State Senator
		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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC	13 Filer ID (Ethics Commission Filers) 00016346
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Morgan LaMantia State Senator
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Gustavo Reveles State Board Of Education
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Raquel Saenz State Board Of Education
		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.)	

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12 COMMITTEE NAME Texas State Teachers Association - PAC		13 Filer ID (Ethics Commission Filers) 00016346
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 Ms. Morgan Kirkpatrick State Board Of Education
		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 - MPAC

17 COMMITTEE NAME Texas State Teachers Association - PAC		18 Filer ID (Ethics Commission Filers) 00016346
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,089.90
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 checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,318.66
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 52,791.50
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: 1/48 Rpt: 17/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, KAY (Ms.) <hr/> 6 Contributor address; City; State; Zip Code RANSOM CANYON, TX 79366	7 Amount of Contribution (\$) \$42.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LUBBOCK ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUAYO, MARCELA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBUJAR-LEON, MICAELA (Ms.) <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ-PINEDA, J. ALICIA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVIZO, JANE (Ms.) <hr/> Contributor address; City; State; Zip Code BONHAM, TX 75418	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/48 Rpt: 18/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMEZAGA, PATRICIA (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code EL PASO, TX 79925	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) EL PASO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KATHLEEN (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code WEBSTER, TX 77598	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, MELISSA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EL PASO, TX 79925	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARISPE, VERONICA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DALLAS, TX 75218	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, WENDE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PASADENA, TX 77505	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CLEAR CREEK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/48 Rpt: 19/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANALES, SANDRA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79925	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBOSA, LETICIA (Ms.) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EDGEWOOD ISD (BEXAR CO)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES-ULLRICH, KAREN (Ms.) <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) AUSTIN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTLETT, CHRISTOPHER (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, PATRICIA (Ms.) <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALIEF ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/48 Rpt: 20/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELMONT, MARLENE (Ms.) 6 Contributor address; City; State; Zip Code PASADENA, TX 77503	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UNIVERSITY OF HOUSTON-CLEAR LAKE
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGHUIS, MARICELA (Ms.) Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAIR, SUE (Ms.) Contributor address; City; State; Zip Code RANSOM CANYON, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LUBBOCK ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORREGO, VERONICA (Ms.) Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BROWNSVILLE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSE, CRYSTAL (Ms.) Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/48 Rpt: 21/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSSE, PORTIA FLECK (Ms.) <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78733	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) STAFF		9 Employer (See Instructions) TSTA
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWEN, WAYNE (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYLES, KATHERINE (Ms.) <hr/> Contributor address; City; State; Zip Code ASPERMONT, TX 79502	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANDFORD, SAKINA (Ms.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CYPRESS-FAIRBANKS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, DELNA (Ms.) <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$86.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/48 Rpt: 22/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, VIVIAN (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code DALLAS, TX 75227	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DALLAS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDDÉ, XOCHITL (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EL PASO, TX 79925	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNDRANT, LAURA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code KILLEEN, TX 76542	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) KILLEEN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKLEY, NATASHA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code KILLEEN, TX 76549	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) KILLEEN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURROLA, MARTHA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ODESSA, TX 79762	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/48 Rpt: 23/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, DEBORAH (Ms.) <hr/> 6 Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) KILLEEN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, ALFREDO (Mr.) <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) KILLEEN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, LETICIA (Ms.) <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DONNA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALFEE, NANCY (Ms.) <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAHAN-NANCE, JEANNE (Ms.) <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/48 Rpt: 24/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS-PIOTROWSKI, GLORIA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, NOEL (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, PATRICIA (Ms.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, ANA KAREN (Ms.) <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDENAS, MICHELLE (Ms.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/48 Rpt: 25/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMONA, ANEZKA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$42.00
8 Principal occupation / Job title (See Instructions) STAFF		9 Employer (See Instructions) TSTA
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, ARISA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARREON, GLORIA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79998	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, NOEL (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, ROSA (Ms.) <hr/> Contributor address; City; State; Zip Code PHARR, TX 78577	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/48 Rpt: 26/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTRO, SUSAN (Ms.) <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SAN ANTONIO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZARES-RODRIGUEZ, LUCERO (Mr.) <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERLIANO, BECKY (Ms.) <hr/> Contributor address; City; State; Zip Code KILGORE, TX 75662	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERVANTES, ELIA (Ms.) <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMPION, ROSE (Ms.) <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/48 Rpt: 27/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CISNEROS, OLGA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CODY, JACK (Mr.) <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CODY, M. DIANE (Ms.) <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, JOCELYN (Ms.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, GWENDOLYN (Ms.) <hr/> Contributor address; City; State; Zip Code BIG SPRING, TX 79720	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/48 Rpt: 28/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORRAL, JESSICA (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code EL PASO, TX 79932	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULOMBE, JENNIFER (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ROCKWALL, TX 75032	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURAGE, JOHN (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SAN ANTONIO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, AARON (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ODESSA, TX 79763	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, JUAN (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) SAN MARCOS CISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/48 Rpt: 29/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, VALERIE (Ms.) <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYNOR, HEATHER (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYNOR, JEFFREY (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, GAY DEAN (Ms.) <hr/> Contributor address; City; State; Zip Code DEER PARK, TX 77536	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ANGELA (Ms.) <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75041	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/48 Rpt: 30/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA GARZA, ALMA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code DONNA, TX 78537	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DONNA ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA ROSA, JUAN (Mr.) <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) LAREDO ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA ROSA, NORMA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIMINCHI, CLYDINE (Ms.) <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, BOBBIE (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/48 Rpt: 31/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, MONICA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) CYPRESS-FAIRBANKS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTRADA, JOANNA (Ms.) <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) DONNA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTRADA, LINDA (Ms.) <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) DONNA ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTRADA, LINDA (Ms.) <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIERRO, ROBERT (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/48 Rpt: 32/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCAL, IRENE (Ms.) <hr/> 6 Contributor address; City; State; Zip Code SAN BENITO, TX 78586	7 Amount of Contribution (\$) <div style="text-align: right;">\$15.00</div>
8 Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		9 Employer (See Instructions) SAN BENITO CISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCHER, PAM (Ms.) <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) <div style="text-align: right;">\$11.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WACO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, ANTHONY (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLEY, LINDA (Ms.) <hr/> Contributor address; City; State; Zip Code KLEIN, TX 77379	Amount of Contribution (\$) <div style="text-align: right;">\$42.00</div>
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRALEY, J. ANDREW (Mr.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/48 Rpt: 33/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, BARBARA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code POTEET, TX 78065	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, KATRINA (Ms.) <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FT. WORTH ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMYER, KARY (Ms.) <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CONROE ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAINES, ERNESTINE (Ms.) <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) BEAUMONT ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLARDO, ANN MARGARET (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/48 Rpt: 34/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, GABRIELLE (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SAN ANTONIO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVILANES, AMELIA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EL PASO, TX 79936	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, CLINTON (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code LUBBOCK, TX 79424	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIMBEL, JULIA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78224	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HARLANDALE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, YOLANDA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code MISSION, TX 78572	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/48 Rpt: 35/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYBILL, P. AILEEN (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code WILLIS, TX 77318	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, TAMARA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code MESQUITE, TX 75181	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREER, KIMBERLY (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code LEANDER, TX 78641	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LEANDER ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, CARRIE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code AUSTIN, TX 78759	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROGAN, ANGEL (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PORT ARTHUR, TX 77640	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) PORT ARTHUR ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/48 Rpt: 36/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUEVARA, NORMA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code DONNA, TX 78537	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		9 Employer (See Instructions) DONNA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, BILLY (Mr.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ROGER (Mr.) <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ABILENE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, MARISA (Ms.) <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RIVIERA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARREL, L. ROBERT (Mr.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/48 Rpt: 37/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GARNELL (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78237	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HARLANDALE ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, NANCY (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code WEBSTER, TX 77598	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, GERALD (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code BUDA, TX 78610	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, HEATHER (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DALLAS, TX 75253	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBORT, DEBRA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EL PASO, TX 79938	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SOCORRO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/48 Rpt: 38/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEREVIA, LUZ (Ms.) <hr/> 6 Contributor address; City; State; Zip Code DONNA, TX 78537	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		9 Employer (See Instructions) DONNA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, CARMEN (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, JUAN (Mr.) <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, MARIA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, RAUL (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) YSLETA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/48 Rpt: 39/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRARA, ADRIAN (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code EL PASO, TX 79934	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) EL PASO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DORIS (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DUNCANVILLE, TX 75116	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GRAND PRAIRIE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIX, CAROL ANN (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DENISON, TX 75020	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SHERMAN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLGUIN, CARLOS (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EL PASO, TX 79932	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HONZELL, DIANE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code KATY, TX 77450	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CYPRESS-FAIRBANKS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/48 Rpt: 40/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, MARY (Ms.) <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDNALL, C. SUZANNE (Ms.) <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, KEVIN (Mr.) <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) BEAUMONT ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, WINIFRED (Ms.) <hr/> Contributor address; City; State; Zip Code ORE CITY, TX 75683	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LONGVIEW ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, SANDRA (Ms.) <hr/> Contributor address; City; State; Zip Code WACO, TX 76705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/48 Rpt: 41/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PATRICIA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77053	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELINDA (Ms.) <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MESQUITE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTTS, RONALD (Mr.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALIEF ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBETH, LAURA (Ms.) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NORTH EAST ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW, ELIZABETH K. (Ms.) <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77345	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALDINE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/48 Rpt: 42/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIRA-ROSAS, DANIELA (Ms.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79912		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENORD, DELOZ (Ms.)	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code WACO, TX 76705		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WACO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, LATOYA (Ms.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ROWLETT, TX 75089		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKWOOD-SNODGRASS, MICHELLE (Ms.)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PORT ARTHUR ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYA, EVELINA (Ms.)	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code ROWLETT, TX 75089		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/48 Rpt: 43/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADRID, ERIC (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code KILLEEN, TX 76542	
8 Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		9 Employer (See Instructions) KILLEEN ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHA, DIANA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAROQUIO, CINDY (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, GLORIA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ABILENE, TX 79605	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) ABILENE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, MARICRUZ (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HARLANDALE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/48 Rpt: 44/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINIC, KATHLEEN K. (Ms.)	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	
8 Principal occupation / Job title (See Instructions) STAFF		9 Employer (See Instructions) TSTA
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERS, SANDY (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78704	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATULA, SHERRIE (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77059	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLEAN, NATALIE (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALIEF ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEE, MALINDA (Ms.)	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code DESOTO, TX 75115	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/48 Rpt: 45/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA, REYNALDA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code DEER PARK, TX 77536	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DEER PARK ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENCHACA, JESSICA (Ms.) <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, ALONZO RENE (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCADO, ANA (Ms.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, OVIDIA (Ms.) <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALIEF ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/48 Rpt: 46/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, CAROL (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code GARLAND, TX 75042	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) GARLAND ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISS, DENECE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code FORT WORTH, TX 76137	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HURST-EULESS-BEDFORD ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDY, JEAN I (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PLANO, TX 75025	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, MARSHA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NABORS, JOHN (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SPRING, TX 77386	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CONROE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/48 Rpt: 47/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEW HASCHKE, DONNA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICKERSON, SHEILA (Ms.) <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75357	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) DALLAS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OEHLER, EUGENE (Mr.) <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OROPEZA, ROSA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVIEDO, GRACIELA (Ms.) <hr/> Contributor address; City; State; Zip Code ELMENDORF, TX 78112	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TSTA STAFF		Employer (See Instructions) SAN ANTONIO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/48 Rpt: 48/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREDES, CYNTHIA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SAN ANTONIO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, HELENE (Ms.) <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) HARLINGEN CISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, LAKEISHA (Ms.) <hr/> Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER PARK ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA, ANGELA (Ms.) <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HAYS CISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, CARLA (Ms.) <hr/> Contributor address; City; State; Zip Code KINGSBURY, TX 78638	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HAYS CISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/48 Rpt: 49/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PESCHEL, JO ANN (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77043	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, AARON (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code AMARILLO, TX 79109	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AMARILLO ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHINISEE, CLARENCE (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DALLAS, TX 75224	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLOCK, AUGUST (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, STEPHANIE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code CONROE, TX 77385	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CONROE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/48 Rpt: 50/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABE, SARAH (Ms.) <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) PFLUGERVILLE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAEHL, VALKYRIE (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ASH (Mr.) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78223	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SOUTHSIDE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDOLPH, PAULA (Ms.) <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, VANESSA (Ms.) <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KLEIN ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/48 Rpt: 51/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RING, DAVID (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code LUBBOCK, TX 79413	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LUBBOCK-COOPER ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, MICHAL (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code RICHARDSON, TX 75081	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, CLAUDINE (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SAN ANTONIO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBISON, CLAY (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code AUSTIN, TX 78731	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS-PICKRON, PEGGY (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ROWLETT, TX 75089	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/48 Rpt: 52/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ANTHONY (Mr.) <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) GARLAND ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, HENRIETTA (Ms.) <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78648	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, VERONICA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, WINNIE (Ms.) <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) LONGVIEW ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBAUM, NOEL (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/48 Rpt: 53/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKER, JAY-ANN (Ms.) <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79935	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUIZ, JAVIER (Mr.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79763	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, VANESSA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, SHEENA (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, YVONNE (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/48 Rpt: 54/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, CLAUDIA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79936	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) YSLETA ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEATON, SUSAN (Ms.) <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SAN MARCOS CISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLARS, CHERYL (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79764	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, MELANIE (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79763	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELBY, LYNDA (Ms.) <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/48 Rpt: 55/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, REGINA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77047	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ALIEF ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIOJI, SHERYL (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMALLEY, CAROLYN (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIDGET (Ms.) <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BEAUMONT ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, FRANCES (Ms.) <hr/> Contributor address; City; State; Zip Code COLUMBIA, MO 65203	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/48 Rpt: 56/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LAUREN (Ms.) <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79407	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LUBBOCK ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY DENIECE (Ms.) <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ANGELICA (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SOCORRO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEED, ELIZABETH (Ms.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINGER, STEVE (Mr.) <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SOCORRO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/48 Rpt: 57/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURRIER, SARAH (Ms.) <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ARLINGTON ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, TERESA (Ms.) <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORM, JOANNE (Ms.) <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79108	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AMARILLO ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, SHARON (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79768	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUAREZ, GRISELDA (Ms.) <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78596	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DONNA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/48 Rpt: 58/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, ELIZABETH (Ms.) <hr/> 6 Contributor address; City; State; Zip Code LOS FRESNOS, TX 78566	7 Amount of Contribution (\$) \$42.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) BROWNSVILLE ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES SAUCEDO, PATRICIA (Ms.) <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAMMELL, MARGARET (Ms.) <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KLEIN ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAVER, SUE (Mr.) <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HURST-EULESS-BEDFORD ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREJO, ELVIRA (Ms.) <hr/> Contributor address; City; State; Zip Code ALICE, TX 78332	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALICE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/48 Rpt: 59/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, RUBEN (Mr.)	7 Amount of Contribution (\$) \$52.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, SELENA (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NORTH EAST ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN HOUTEN, KATRINA (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DALE, TX 78616	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANZANDT, SHERRY (Ms.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code DALLAS, TX 75215	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) DALLAS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEAZEY, REBECCA (Ms.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/48 Rpt: 60/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELEZ, CYNTHIA (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code MIDLAND, TX 79707	
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) PECOS-BARSTOW-TOYAH ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALPANDO, RUDY (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EAGLE PASS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIVIAN, KRISTA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ODESSA, TX 79763	
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, SHEILA (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code DALLAS, TX 75217	
Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		Employer (See Instructions) DALLAS ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER-MARTINEZ, DONNA BETH (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code BUDA, TX 78610	
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/48 Rpt: 61/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, TRACI (Ms.) <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79415	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LUBBOCK ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, A. LOUISE (Ms.) <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITING, RHONDA (Ms.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALIEF ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIEDING, SCOTT (Mr.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SPRING BRANCH ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILCOX, SUSAN (Ms.) <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/48 Rpt: 62/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKE, CYNTHIA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79936	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SOCORRO ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, A. DIANE (Ms.) <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANDRE (Ms.) <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TYLER ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JOHNETTA (Ms.) <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TANZANYIKA (Ms.) <hr/> Contributor address; City; State; Zip Code HOCKLEY, TX 77447	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CYPRESS-FAIRBANKS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/48 Rpt: 63/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS-RICHARDSON, DAWN (Ms.) <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76549	7 Amount of Contribution (\$) \$42.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) KILLEEN ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BARBARA (Ms.) <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ARLINGTON ISD
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHAM, BETH (Ms.) <hr/> Contributor address; City; State; Zip Code WINTERS, TX 79567	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WINTERS ISD
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, SANDRA (Ms.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLIE, JASON (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TSTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/48 Rpt: 64/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, LYDIA (Ms.) ----- 6 Contributor address; City; State; Zip Code DONNA, TX 78537	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL SUPPORT PERSONNEL		9 Employer (See Instructions) DONNA ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUNIGA, DEBRA (Ms.) ----- Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HARLANDALE ISD

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C4**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C4: Sch: 1/1 Rpt: 65/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/25/2024	5 Corporation / Labor Organization name Texas State Teachers Association	6 Amount (\$) 1,318.66

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 66/79
2 FILER NAME Texas State Teachers Association - PAC		3 Filer ID (Ethics Commission Filers) 00016346
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 1/13 Rpt: 67/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Ann Johnson Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 56386 Houston, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 134
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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 08/19/2024	Payee name Birkholz for Texas
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3441 Alexandrite Way Round Rock, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 052
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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 08/19/2024	Payee name Campaign Fund of Denise Wilkerson
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1808 Winewood Lane Arlington, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 094
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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.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 68/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Carol Alvarado Campaign
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 230842 Houston, TX 77223
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for Senate - SD 06
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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 08/19/2024	Payee name Cassandra Hernandez for Texas
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1289 Addison, TX 75001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 115
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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 08/19/2024	Payee name Cecilia Castellano for State Representative Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 Savannah Heights Von Ormy, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 080
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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.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 69/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Chris Turner Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 182093 Arlington, TX 76096
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 101
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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 08/19/2024	Payee name Committee to Elect Charlene Ward Johnson
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 925775 Houston, TX 77292
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 139
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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 08/19/2024	Payee name Committee to Elect Dawn Richardson
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 690523 Killeen, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 054
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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.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 70/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Donna Howard Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 5375 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 048
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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 08/19/2024	Payee name Eddie Morales Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 Hillcrest Blvd Eagle Pass, TX 78852
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 074
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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 08/19/2024	Payee name Friends of Raquel Saenz
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2000 FM 1460 Apt. 5303 Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for State Board of Education - SBOE 10
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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.

1 Total pages Schedule F1: Sch: 5/13 Rpt: 71/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Gene Wu for State Representative
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5522 Jessamine Houston, TX 77081
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 137
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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 08/19/2024	Payee name Gina Hinojosa for State Representative
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 300095 Austin, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 049
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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 08/19/2024	Payee name Gustavo Reveles Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2386 Enchanted Crown Dr. El Paso, TX 79911
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for State Board of Education - SBOE 01
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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.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 72/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Harold Dutton, Jr. Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4001 Jewett St. Houston, TX 77026
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 142
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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 08/19/2024	Payee name Jennifer Lee for Texas House District 55
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1916 Temple, TX 76503
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 055
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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 08/19/2024	Payee name John Bryant Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 140977 Dallas, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 114
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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 | 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: 7/13 Rpt: 73/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/19/2024	5 Payee name John Bucy Campaign	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 536 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 136
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Jolanda Jones Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10709 Marsha Lane Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 147
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Jonathan Gracia for State Representative	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 119 W. Van Buren Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 037
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 74/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Josey Garcia for Texas House District 124
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 718 Amber Knoll San Antonio, TX 78251
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 124
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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 08/19/2024	Payee name Laurel for Texas
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 6866 San Antonio, TX 78209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 121
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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 08/19/2024	Payee name Linda Garcia Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1908 Haddock Drive Mesquite, TX 75149
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 107
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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.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 75/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Molly for Texas
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6 Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 667238 Houston, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for Senate - SD 15
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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 08/19/2024	Payee name Morgan Kirkpatrick for SBOE 15 Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4417 77th Street Lubbock, TX 79424
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for State Board of Education - SBOE 15
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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 08/19/2024	Payee name Morgan LaMantia for State Senate Committee
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1324 E. Madison Ave. Brownsville, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for Senate - SD 27
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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.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 76/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
4 Date 08/23/2024	5 Payee name NEA Fund for Children and Public Education	
6 Amount (\$) \$2,791.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 64702 Baltimore, MD 21264-4702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Joint PAC fundraising transfer to NEA Fund for Children & Public Education for authorized purposes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Penny Shaw Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 925991 Houston, TX 77292	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 148
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Philip Cortez for State Representative	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7919 Liberty Island San Antonio, TX 78227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 117
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 77/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Plesa for Texas
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 796311 Dallas, TX 75248
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 070
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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 08/19/2024	Payee name Rhetta Andrews Bowers Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 Lakeview Pkwy, Ste. B, #211 Rowlett, TX 75088
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 113
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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 08/19/2024	Payee name Sheryl Cole Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 41 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 046
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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.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 78/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Solomon Ortiz for Texas
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 286 Corpus Christi, TX 78403
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 034
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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 08/19/2024	Payee name Terry Meza Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 155076 Irving, TX 75015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 105
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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 08/19/2024	Payee name Trey Martinez Fischer Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 104 Babcock Road Suite 107 San Antonio, TX 78201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 116
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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.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 79/79	2 FILER NAME Texas State Teachers Association - PAC	3 Filer ID (Ethics Commission Filers) 00016346
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4 Date 08/19/2024	5 Payee name Vikki Goodwin Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3701 Shady Valley Dr. Austin, TX 78739
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 047
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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 08/19/2024	Payee name Vince Perez Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 71309 El Paso, TX 79917
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution for House of Representatives - HD 077
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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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